



NOTICE OF CANDIDACY (Non- PARTISAN) 2015 Burgaw Election
Election Year Municipal/County

For the office of: Town of Burgaw Commissioner

Date: _____ Candidate ID: _____

I hereby file notice as a candidate for election to the office of Town Commissioner in the General Election to be held on Nov. 3 2015 in Pender County. I request that my name appear on the ballot as follows:

Vernon Harrell

Please print or type name above
Residential Address: (Street, City, ZIP) 108 N. McRae St. Burgaw, N.C. 28425
Mailing Address if different (POB, City, Zip) PO Box 1354 Burgaw, N.C. 28425

Home: () - _____ Cell: (910) 259-5710 Business: () - _____

Check "YES" or "NO" I swear to the following to be true, correct, and complete to the best of my knowledge or belief.

YES NO
 Have you ever been convicted of a felony? (Felony conviction need not be disclosed if the conviction was dismissed as a result of reversal on appeal or resulted in a pardon of innocence or expungement.)

If you have been convicted of a felony, you are required to complete the "Candidate Felony Disclosure" form within 48 hours of submitting this notice. GS § 163-106

Signature of Candidate (legal name) Vernon Harrell

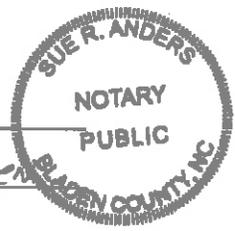
Certification of Notice of Candidacy

I hereby certify that Vernon Harrell (Name as it will appear on ballot) the candidate who signed above, personally appeared before me this day and signed in my presence.

Sworn and subscribed before me this 18 day of June, 2015.

Title and signature of certifying Officer: Sue R. Anders

My commission expires: 04/24/2016 State of North Carolina, County of Bladen



Verification by County Board of Elections

The undersigned has examined the voter registration records in Pender County and found Vernon Harrell to be a registered voter in the municipality/County of Burgaw
County Chairman, Secretary or Director: [Signature] 7/16/15
Signature and date

The Notice of Candidacy must be signed in the presence of the chairman, secretary or director of the Board of Elections with which he/she files or a candidate may have his/her signature on the Notice of Candidacy acknowledged and certified to by any officer authorized to administer an oath. (See NCGS § 163-294.2.) In signing his/her notice of candidacy the candidate may use a nickname provided the candidate complies with the requirement specified in GS § 163-106 and GS § 163-323(a).

Information about the powers, duties, and responsibilities of city and county elective offices in North Carolina is available from the School of Government of the University of North Carolina at Chapel Hill at <http://www.sog.unc.edu>. The School of Government provides training, research, and consultation for state and local government officials and citizens.

Disclosure Report Cover

Amendment
 Yes No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information.

1. Committee Information	
a. Full Name Vernon Harrell for Burgaw	c. ID Number
b. Mailing Address (Include City, State and Zip Code) PO Box 1354 Burgaw, N.C. 28425	d. Date Filed 7/16/15
	e. Phone Number 910-259-5710

2. Report Year 2015	3. Period Start Date (mm/dd/yy) July 07/	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input checked="" type="checkbox"/> Organizational	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-election	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input checked="" type="checkbox"/> Booster Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Semi-annual	
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input type="checkbox"/> Mid Year	10. Special Report Name
		<input type="checkbox"/> Special	<input type="checkbox"/> Year End	
			<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	

11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
b. Purpose		b. Purpose	
c. Account Code		c. Account Code	
d. Period Begin Balance		d. Period Begin Balance	
\$		\$	

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

MICHELLE PARÉ Michelle Paré 7/16/2015
 Printed Name of Signer Signature of Appointed Treasurer Date

FOR OFFICE USE ONLY

Date Received: _____	Employee: _____	Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training
Date Postmarked: _____	Employee: _____	
Date Scanned: _____	Employee: _____	
Date Data Entered: _____	Employee: _____	

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
 You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Statement of Organization - Candidate Committee

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information					
a. Full Name			c. ID Number		
Vernon Harrell For Burgaw					
b. Mailing Address (include City, State and Zip Code)			d. Date Organized		
PO Box 1354 Burgaw, N.C. 28425			07/12/2015		
			e. Phone Number		
			910-259-5710		
2. Candidate Information					
<input type="checkbox"/> Candidate's Primary Committee					
a. Full Name		a. Candidate ID Number		f. Party Affiliation	
Vernon Harrell				Non-partisan	
				(Indicate Non-partisan if applicable)	
b. Mailing Address (include City, State, and Zip Code)			g. Office Sought		
PO Box 1354 Burgaw, N.C. 28425			Burgaw Town Board		
c. Phone Number	d. Email Address		h. Next Election Year	i. Jurisdiction	
910-259-5710	burgawcandidate@gmail.com		2019	Town of Burgaw Pender County N.C.	
<input checked="" type="checkbox"/> Email copy of notices					
3. Treasurer Information			4. Custodian of Books Information		
a. Full Name			a. Full Name		
Michelle Pare'			Vernon Harrell		
b. Mailing Address (include City, State, and Zip Code)			b. Mailing Address (include City, State, and Zip Code)		
PO Box 1354 Burgaw, N.C. 28425			see below		
c. Phone Number	d. Email Address		c. Phone Number	d. Email Address	
910-264-7800	mmpare@gmail.com				
I prefer to receive notices by email <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Email copy of notices		
5. Assistant Treasurer Information			6. Account Information (incl. CRO-3500)		
a. Full Name			<input type="checkbox"/> Add	a. Financial Institution Full Name	
Vernon Harrell			<input type="checkbox"/> Remove		
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
PO Box 1354 Burgaw, N.C. 28425					
c. Phone Number	d. Email Address		c. Account Code	d. Type	
910-259-5710	burgawcandidate@gmail.com				
<input type="checkbox"/> Email copy of notices					
CERTIFICATION					
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.					
MICHELLE PARE'		<i>Michelle Pare'</i>		7/16/2015	
Printed Name of Signer		Signature of Appointed Treasurer		Date	



North Carolina
 State Board of Elections
 441 N Harrington Street
 Raleigh, NC 27603

Kim Westbrook Strach
 Executive Director

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

FILED BY:

Committee Name: Vernon Harrell for Burgaw

Treasurer Name: ~~Vernon Harrell~~ Michelle Pare'

Treasurer Address: PO Box 1354 / 108 N. McRae St.

(include city, state, & zip) Burgaw, N.C. 28425

Treasurer Phone: 910-259-5710

Check One:

I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

7/16/2015
 Date Signed

Michelle Pare'
 Signature



North Carolina
 State Board of Elections
 506 N Harrington Street
 Raleigh, NC 27603

Kimberly Westbrook-Strach
 Deputy Director – Campaign Reporting

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173
 Fax: (919) 715-8047

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:

Candidate Name: Vernon Harrell
 Treasurer Name: Vernon Harrell
 Treasurer Address: 108 N. McRae ST.
 (include city, state, & zip) PO Box 1354
Burgaw, N.C. 28425
 Treasurer Phone: 910-259-5710

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

11/5/15
 Date Signed

Vernon Harrell
 Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



North Carolina
 State Board of Elections
 506 N Harrington Street
 Raleigh, NC 27603

Kimberly Westbrook-Strach
 Deputy Director – Campaign Reporting

Mailing Address
 PO Box 27255
 Raleigh, NC 27611-7255
 (919) 733-7173
 Fax: (919) 715-8047

Certification to Close Committee

This Certification is used to express the intent to close the committee after all funds have been properly disbursed.

FILED BY:

Committee Name: Vernon Harrell For Burgaw

Treasurer Name: Vernon Harrell

Treasurer Address: 108 N. McRae St. / PO Box 1354

(include city, state, & zip) Burgaw, N.C. 28425

Treasurer Phone: 910-259-5710

I certify that the above mentioned Committee intends to close and cease existence. Upon signing this certification, I declare that all funds have been distributed and reported (if required). In addition, no contributions will be accepted or disbursements made after the "Final Report" is filed or this form is signed. If the Committee at any future time intends to accept or spend funds in support or opposition of any candidate or ballot issue, a new political committee must be formed and registered with the Board of Elections before such activities may commence.

Committees that have filed under the \$1,000 threshold will only be required to sign this Certification. No "Final Report" will be required for committees meeting this criterion. Any Committee that did not file under the \$1,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

1/27/16
 Date Signed

Vernon Harrell
 Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

Pender County Board of Elections
 PO Box 1232
 Burgaw, NC 28425