



NOTICE OF CANDIDACY (Non- PARTISAN) 2008 GENERAL Election
(Name of Election)

For the office of: BOARD OF EDUCATION NORTH BUNCOMBE

Date: 07/21/2008 Candidate ID: MDHVCS
BOARD OF EDUCATION NORTH BUNCOMBE

I hereby file notice as a candidate for election to the office of _____ in the
2008 GENERAL Election to be held on 11/04/2008 in BUNCOMBE County or
Municipality. I request that my name appear on the ballot as follows:

Kevin Ronald Dodson
Please print or type name above
12 JABEZ DR WEAVERVILLE, NC 28787
Residential Address: (Street, City, ZIP)

Mailing Address if different (POB, City, Zip)

Home: (828) 658 - 8601 Cell: (828) 243 - 4584 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. G.S. 163-106

Kevin Ronald Dodson
Signature of Candidate (legal name)

Certification of Notice of Candidacy

I hereby certify that Kevin Ronald Dodson 201136, the candidate who signed above,
(Name as it will appear on ballot)
personally appeared before me this day and signed in my presence.

Sworn and subscribed before me this 21st day of July, 2008

Title and signature of Certifying Officer: Reah P. Brax Notary Public
My commission expires: 8/21/10

Verification by BUNCOMBE County Board of Elections

The undersigned has examined the voter registration records in BUNCOMBE County and found
KEVIN DODSON to be a registered voter in the county or municipality
of BUNCOMBE.
County Chairman or Director: Aera D. Parker
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).

Statement of Organization - Candidate Committee

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.

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

1. Committee Information	
a. Full Name	c. ID Number
Kevin Ronald Dodson	
b. Mailing Address (include City, State, and Zip Code)	d. Date Organized
12 Jabez Drive Weaverville NC 28787	
	e. Phone Number
	828-658-8601

2. Candidate Information		<input type="checkbox"/> Candidate's Primary Committee
a. Full Name	c. Candidate ID Number	d. Party Affiliation
Kevin Ronald Dodson		R
b. Mailing Address (include City, State, and Zip Code)	e. Office Sought	f. Jurisdiction
12 Jabez Dr Weaverville NC 28787	NB School District Board of Education	
	(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)	

3. Treasurer Information		4. Custodian of Books Information	
a. Full Name	a. Full Name		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address

5. Assistant Treasurer Information		<input type="checkbox"/> Add	6. Account Information (only CRO-3500)		<input type="checkbox"/> Add
a. Full Name	<input type="checkbox"/> Remove		a. Financial Institution Full Name	<input type="checkbox"/> Remove	
b. Mailing Address (include City, State, and Zip Code)			b. Purpose		
c. Phone Number	d. Email Address	c. Account Code	d. Type		

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.

Kevin Ronald Dodson Kevin Ronald Dodson 7-21-08
 Printed Name of Signer Signature of Appointed Treasurer Date



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 Threshold

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$3,000 in the current election cycle.

FILED BY:

Committee Name: Kevin Ronald Dodson
 Treasurer Name: Kevin Ronald Dodson
 Treasurer Address: 12 Jabez Drive
 (include city, state, & zip) Weaver ville NC 28787

 Treasurer Phone: 828-658-8601

Check One:

I certify that this committee intends to neither receive nor expend more than \$3,000 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 \$3,000 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 under the \$3000 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.

7-21-08
 Date Signed

Kevin Ronald Dodson
 Signature

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 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: Kevin Ronald Dodson

Treasurer Name: Kevin Ronald Dodson

Treasurer Address: 12 Jabez Drive

(include city, state, & zip) Weaueville NC 28787

Treasurer Phone: 828-658-8601

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).

7-21-08
Date Signed

[Signature]
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

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

FILED BY:

Committee Name: Kevin Ronald Dodson
 Treasurer Name: Kevin Ronald Dodson
 Treasurer Address: 12 Jabez Drive
 (include city, state, & zip) Weaver ville NC 28787
 Treasurer Phone: 828-658-8601

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "account code" in order to provide account information on required disclosure reports. If an account number is used as the "account code", confidentiality of the account number is presumed to have been waived.

Type of account	Financial Institution	Address	Account Number	Account Code
checking	SECU	NewStark Weaver ville NC	18173735	

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

7-21-08
 Date Signed

[Signature]
 Signature of Candidate or Treasurer

In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)

 Date Signed

 Signature of Candidate or Treasurer