



NORTH CAROLINA

STATE BOARD OF ELECTIONS

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: Stuart Paul O'Neal

Treasurer Name: Stuart Paul O'Neal

Treasurer Address: 893 Waterlily Road

(include city, state, & zip) Coinjock, NC 27923

Treasurer Phone: (252)453-3011

Check One:

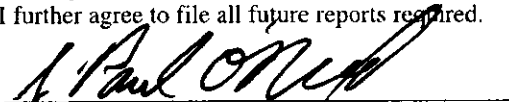
I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 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.

2-25-2024

Date Signed


Signature



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FILED BY:

Committee Name: Stuart Paul O'Neal

Treasurer Name: Stuart Paul O'Neal

Treasurer Address: 893 Waterlily Road
(include city, state, & zip) Coinjock, NC 272923

Treasurer Phone: (252) 453-3011

Check One:

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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.

12/15/2023

Date Signed

Stuart Paul O'Neal
Signature



NORTH CAROLINA STATE BOARD OF ELECTIONS

Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

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

Candidate Name: Stuart Paul O'Neal

Committee Name: Paul O'Neal for Commissioner

Treasurer Name: Stuart Paul O'Neal

If Candidate is own treasurer, designate an agent to carry out designations: _____

Committee ID #: _____

Level Registered: [State] [County] If county, specify: Currituck County Commissioner

I, _____, hereby direct that in the event of my death or incapacity all
(Name of Candidate)
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

<u>Name of Entity</u> <i>(Select from §163-278.16B(a))</i>	<u>Plan for Disbursement (eg. Amount or %)</u>
1. <u>Currituck County Republican Party</u>	<u>100%</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: *Stuart Paul O'Neal*

Date: 12/15/2023

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

a. Full Name		c. ID Number	
Stuart Paul O'Neal		LCF63R	
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
893 Waterlily Road Coinjock, NC 27923		02-25-2024	
		e. Phone Number	
		(252)453-3011	

2024	01/01/2024	02/27/2024	Stuart Paul O'Neal
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<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:	<input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser	Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
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a. Financial Institution Full Name		a. Financial Institution Full Name	
SECU		SECU	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
Personal Checking	CK 1	Credit Card	CCI
	d. Period Begin Balance		d. Period Begin Balance
	\$ 4040.95		\$ 4040.95

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.

Stuart Paul O'Neal

Printed Name of Signer

Stuart Paul O'Neal

Signature of Appointed Treasurer

02/25/2024

Date

FOR OFFICE USE ONLY

Date Received: _____
 Date Postmarked: _____
 Date Scanned: _____
 Date Data Entered: _____

Employee: _____
 Employee: _____
 Employee: _____
 Employee: _____

Delivery Method

- Normal Mail
- Registered Mail
- Hand Delivered
- Electronically Filed
- Signer has not received mandatory training

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.

Detailed Summary

Amendment
 Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information.

Stuart Paul O'Neal		2024 1 st QTR		LCF63R	
Start of Election Cycle: January 1, 2024		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$	4040.95	\$	
5) Aggregated Contributions from Individuals	<i>(CRO-1205)</i>	\$	0.00	\$	
6) Contributions from Individuals	<i>(CRO-1210)</i>	\$	0.00	\$	
7) Contributions from Political Party Committees	<i>(CRO-1220)</i>	\$	0.00	\$	
8) Contributions from Other Political Committees	<i>(CRO-1230)</i>	\$	0.00	\$	
9) Loan Proceeds	<i>(CRO-1410)</i>	\$	0.00	\$	
10) Refunds/Reimbursements To the Committee	<i>(CRO-1240)</i>	\$	0.00	\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	<i>(CRO-1250)</i>	\$	0.00	\$	
11b) Contributions from Not-for-Profit Organizations	<i>(CRO-1250)</i>	\$	0.00	\$	
11c) Outside Sources of Income	<i>(CRO-1250)</i>	\$	0.00	\$	
11d) Legal Expense Fund – Other Sources	<i>(CRO-1270)</i>	\$	0.00	\$	
11 e) Exempt Purchase Price Sales	<i>(CRO-1265)</i>	\$	0.00	\$	
12) TOTAL RECEIPTS <i>(Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</i>		\$	4040.95	\$	
13) Disbursements					
13a) Operating Expenditures	<i>(CRO-1310)</i>	\$	4040.95	\$	
13b) Contributions to Candidates/Political Committees	<i>(CRO-1310)</i>	\$	0.00	\$	
13c) Coordinated Party Expenditures	<i>(CRO-1310)</i>	\$	0.00	\$	
14) Aggregated Non-Media Expenditures	<i>(CRO-1315)</i>	\$	0.00	\$	
15) Loan Repayments	<i>(CRO-1420)</i>	\$	0.00	\$	
16) Refunds/Reimbursements From the Committee	<i>(CRO-1320)</i>	\$	0.00	\$	
17) In-Kind Contributions	<i>(CRO-1510)</i>	\$	0.00	\$	
18) TOTAL EXPENDITURES <i>(Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</i>		\$	4040.95	\$	
19) Cash on Hand at End <i>(Add lines 4 and 12 together, then subtract line 18)</i>		\$	0.00	\$	
20) Non-Monetary Gifts Given to Other Committees	<i>(CRO-1330)</i>	\$	0.00		
21) Outstanding Loans (incl. ones from other campaigns)	<i>(CRO-1430)</i>	\$	0.00		
22) Debts and Obligations owed By the Committee	<i>(CRO-1610)</i>	\$	0.00		
23) Debts and Obligations owed To the Committee	<i>(CRO-1620)</i>	\$	0.00		
24) Account Transfers Within the Committee	<i>(CRO-1720)</i>	\$	0.00		
25) Administrative Support	<i>(CRO-1710)</i>	\$	0.00	\$	
26) Forgiven Loans	<i>(CRO-1440)</i>	\$	0.00	\$	
27) 48-Hour Notice Reports Sum	<i>(CRO-2220)</i>	\$	0.00	\$	
28) Contributions to be Refunded	<i>(CRO-1215)</i>	\$	0.00	\$	

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Stuart Paul O'Neal					
<input checked="" type="checkbox"/> Operating Expenses		<input type="checkbox"/> Contributions to Candidates/Political Committees		<input type="checkbox"/> Coordinated Party Expenditures	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Neighborhood Signs 6655 Amberton Drive, Suite L Elkridge, MD 21075			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CC1	Credit Card		01/17/2024	\$1265.00	Signs
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) Precision Printing 307 S Road Street Elizabeth City, NC 27909			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$
CC1	Credit Card		1/29/2024	\$1738.75	Mailer & Literature
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip) USPS Moyock, NC			b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$
CC1	Credit Card		1/24/2024	\$991.45	Postage for Mailer
				\$	
				\$ 3995.20	
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)				\$ 4040.95	

- | | | | |
|--|--|---|---|
| A* - Media
E - Salaries
I - Postage
O* - Other | B* - Printing
F* - Equipment
J - Penalties | C* - Fundraising
G - Political Party
K* - Office Expenses | D - To Another Candidate
H* - Holding Public Office Expenses
Q* - Donation to Legal Expense Fund |
|--|--|---|---|

Disbursements

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Stuart Paul O'Neal					
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
a. Full Name, Mailing Address & Phone (include city, state, & zip) Lowe's 1605 West Ehringhaus Street Elizabeth City, NC 27909		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input checked="" type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
CC1	Credit Card		1/22/2024	\$45.75	Poles for Signs
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Coordinated Committee Name c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		d. Comments e. Election Sum to Date \$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				\$	
				\$	
					\$ 45.75
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 4040.95
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses		
I - Postage	J - Penalties	K* - Office Expenses	Q* - Donation to Legal Expense Fund		
O* - Other					

CANDIDATE FILING PACKET / CHECKLIST

FILING FORMS AND DOCUMENTS

- Voter Profile
- Notice of Candidacy, Nickname Affidavit (if applicable)
- Filing Fee (must pay by check if filing fee is \$50 or more)
- Signage and Electioneering Information
- Littering statutes

CAMPAIGN FINANCE

Additional forms can be found at www.ncsbe.gov in the Campaign Finance section.

- Statement of Organization (CRO-2100A)** (**The Certification of Treasurer form has been combined into Statement of Organization form-one document for BOTH**)
- Treasurer Training Schedule or www.ncsbe.gov Campaign Finance section
- Certification of Financial Account Information (CRO-3500)**
- Candidate Designation of Committee Funds (CRO-3900)**

Candidates **OVER \$1,000** Threshold:

- Disclosure Report Cover (CRO-1000)**
- Detailed Summary (CRO-1100)**
- Organizational Disclosure Report (due within 10 days) www.ncsbe.gov

Candidates **UNDER \$1,000** Threshold:

(If eligible)

- Certification of Threshold (CRO-3600)**

- 2024 Candidate's Guide to Campaign Finance in North Carolina.

****Forms must be completed and returned to Board of Elections within 10 days of filing.**

Your forms must be received by 12-15-23

Candidate acknowledges receipt of this information A. Paul O'Neal

Candidate Paul O'Neal Date Filed 12-5-23

- o Statement of Organization (CRO-2100A)** Date Returned 12-15-23
- o Certification of Financial Account Number (CRO-3500)** Date Returned 12-15-23
- o ~~Certification of Treasurer (CRO-3100)**~~ Date Returned
- o Candidate Designation of Committee Funds (CRO-3900)** Date Returned 12-15-23

Candidates **OVER \$1,000** Threshold:

- o Disclosure Report Cover (CRO-1000)** Date Returned N/A
- o Detailed Summary (CRO-1100)** Date Returned N/A
- o Organizational Disclosure Report Date Returned N/A

Candidates **UNDER \$1,000** Threshold: (if eligible)

- o Certification of Threshold (CRO-3600)** Date Returned 12-15-23

Notes: