



**Board of  
Elections**

**COF**

TEL 919 856 6240  
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337 S. Salisbury Street  
P.O. Box 695 • Raleigh, NC 27602-0695  
[www.wakegov.com](http://www.wakegov.com)

July 30, 2009

Mr. Anders E. Skaar  
4301 Manor Field Way, Apt 12  
Raleigh, North Carolina 27612

Dear Mr. Skaar:

We are in receipt of your letter dated July 16, 2009 withdrawing your Notice of Candidacy for the Office of Mayor of Raleigh.

Pursuant to NCGS 163-294-2(d), the Wake County Board of Elections has accepted your withdrawal of candidacy. Your name will not appear on the October 6, 2009 ballot.

Sincerely,

A handwritten signature in cursive script that reads "Cherie Poucher".

Cherie Poucher, Director  
Wake County Board of Elections



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:

Audrey Sklar

Treasurer Name:

Same

Treasurer Address:

4301 Manor Field Wy - 12

(include city, state, & zip)

Raleigh NC 27612

Treasurer Phone:

919 212 8122

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 on 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 \$3,000 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 \$3,000 threshold must submit a "Final Report" with this Certification. This report must have a zero balance with no outstanding loans or debts.

8/1/09  
 Date Signed

A. Sklar  
 Signature

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

RECEIVED  
 AUG 4 2009  
 BY: \_\_\_\_\_  
 June 2007

# 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

Yes

No

## 1. Committee Information

a. Full Name

Anders Skaar

c. ID Number

b. Mailing Address (include City, State and Zip Code)

4301 Mauson Road Wy - 12  
Raleigh NC 27612

d. Date Organized

e. Phone Number

919 242 8122

## 2. Candidate Information

a. Full Name

Anders Skaar

Candidate's Primary Committee

c. Candidate ID Number

d. Party Affiliation

b. Mailing Address (include City, State, and Zip Code)

Same

e. Office Sought

f. Jurisdiction

(If office sought is nonpartisan, write "Nonpartisan" in [d] Party Affiliation.)

## 3. Treasurer Information

a. Full Name

Same

b. Mailing Address (include City, State, and Zip Code)

## 4. Custodian of Books Information

a. Full Name

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

a. Full Name

Add  
 Remove

b. Mailing Address (include City, State, and Zip Code)

c. Phone Number

d. Email Address

## 6. Account Information (incl. CRO-3500)

a. Financial Institution Full Name

Add  
 Remove

b. Purpose

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.

ANDERS SKAAR

Printed Name of Signer

A. Skaar

Signature of Appointed Treasurer

8/1/09

Date



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*AKA*

**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:

*Aubrey Isaac*

Treasurer Name:

*Same*

Treasurer Address:

*Same*

(include city, state, & zip)

*4201 Manor Road Wg - 12*

*Raleigh NC 27612*

Treasurer Phone:

*919 212 8102*

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.

*8/1/09*

Date Signed

*A. Isaac*

Signature

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



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**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).

Candidate Name: Andrew Sloan

Committee Name: Same

Treasurer Name: Same

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

Committee ID #: \_\_\_\_\_

Level Registered: [State] [County] If county, specify: \_\_\_\_\_

I, Andrew Sloan, 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).

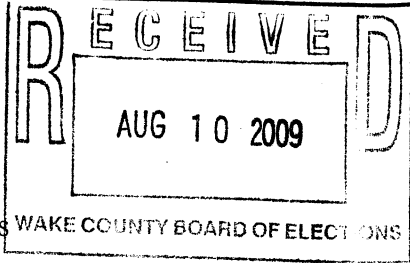
	Name of Entity (Select from §163-278.16B(a))	Plan for Disbursement (eg. Amount or %)
1.	<u>N/A</u>	_____
2.	_____	_____
3.	_____	_____

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: A. Sloan

Date: 8/1/09

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



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**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: Andrew Sloan  
 Treasurer Name: same  
 Treasurer Address: 4301 Mark Field Wy - 12  
 (include city, state, & zip) Raleigh NC 27617  
 Treasurer Phone: 919 218 8102

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.

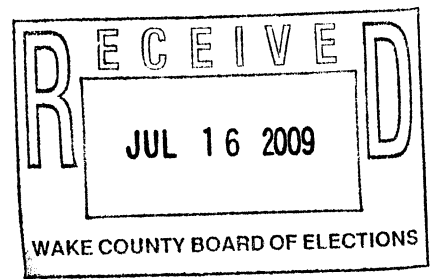
I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three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

8/9/09  
 Date Signed

A. Sloan  
 Signature of Candidate

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

Anders Skaar  
4301 Manor Field Way - 12  
Raleigh NC 27612



July 16, 2009

Barbara Sucato  
Wake County Board of Elections  
Box 695  
Raleigh, NC 27602

Dear Barbara,

I would like to withdraw my candidacy as of today.

Thank you,

*Anders Skaar*

Anders E. Skaar