



# North Carolina Notice of Candidacy

G.S. 163-106

## Election information

- 1 Title of the office sought WSFCS Board of Education  
Seat, district, or ward (if applicable) At Large  
Election Primary Election date (mm/dd/yyyy) 03/08/2022

## Candidate information

You must provide your **full legal name** in this section.  
This information will be public.

- 2 Last name Coone Suffix (Jr, Sr., II, III, IV) \_\_\_\_\_  
First name Sabrina Middle name \_\_\_\_\_  
Name to appear on ballot Sabrina Coone - Godfrey  
Campaign phone number 336-971-1825 Campaign email Sabrina4BOE@gmail.com  
NC State Bar number (Judicial and District Attorney candidates only) \_\_\_\_\_

## Residential address

This information will be public.

- 3 Address (not P.O. Box) 980 Woodhaven Forest Dr Unit # \_\_\_\_\_  
City Winston-Salem State NC Zip 27105  
County Forsyth

## Mailing address

This information will be public.

- 4 ☒ Same as above  
Address or P.O. Box \_\_\_\_\_ Unit # \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
County \_\_\_\_\_

## Candidate's pledge

Check 1 box and complete the pledge that applies to the office that you are seeking candidacy for.

- ☒ **I am filing for a partisan contest:**  
I hereby file notice as a candidate for nomination as \_\_\_\_\_  
in the Democrat party primary election to be held on (mm/dd/yyyy) 03/08/22.  
I affiliate with the Democrat party (and I certify that I am now registered on the registration records of the precinct in which I reside as an affiliate of the Democrat party).  
5 I pledge that I have been affiliated with that party for at least 90 days as of the date of the filing of the notice of candidacy. I pledge that if I am defeated in the primary, I will not run for the same office as a write-in candidate in the next general election.  
☐ **I am filing for a non-partisan contest:**  
I hereby file notice that I am a candidate for election to the office of \_\_\_\_\_  
(District/Ward) \_\_\_\_\_ for the governing body of \_\_\_\_\_  
in the regular election to be held on (mm/dd/yyyy) \_\_\_\_\_.

## Felony disclosure

- 6 Have you ever been convicted of a felony? ☐ Yes ☒ No  
If you have been convicted of a felony, you must complete a **Candidate Felony Disclosure** form within 48 hours of submitting this notice (G.S. 163-106). The required form can be obtained from any election office or from the NC State Board of Elections website at [www.NCSBE.gov](http://www.NCSBE.gov). A prior felony conviction does not preclude holding elected office if rights of citizenship have been restored. 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.

## Affidavit attesting to nickname

Complete only if you would like an acceptable nickname to appear on the ballot in lieu of your legal name.

Even if your nickname is accepted, your legal last name will still appear on the ballot.

I, \_\_\_\_\_, have been duly sworn, hereby state under oath that I have been commonly known by the nickname \_\_\_\_\_ for at least five years and request that my name be placed on the ballot as follows: \_\_\_\_\_  
In the event that another candidate with the same last name as mine files notice of candidacy for the same office for which I am a candidate, my name should be listed as: \_\_\_\_\_

State of North Carolina, \_\_\_\_\_ County.

I hereby certify that \_\_\_\_\_, the candidate who signed this Affidavit attesting to nickname, personally appeared before me this day and signed this document in my presence.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name of notary \_\_\_\_\_

My commission expires (mm/dd/yyyy) \_\_\_\_\_

Notary, sign here

X

## Acknowledgment of notice of candidacy

This section must be completed by a certifying officer or notary.  
See G.S. 163-106(a)

Each candidate shall sign the notice of candidacy in the presence of the chairman or secretary of the board of elections, State or county, with which the candidate files. In the alternative, a candidate may have the candidate's signature on the notice of candidacy acknowledged and certified to by an officer authorized to take acknowledgments and administer oaths, in which case the candidate may mail or deliver by commercial courier service the candidate's notice of candidacy to the appropriate board of elections.

State of North Carolina, \_\_\_\_\_ County.

I hereby certify that \_\_\_\_\_, the candidate who signed this notice of candidacy, personally appeared before me this day and signed this document in my presence or acknowledged his/her signature to be the same.

8 Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name of certifying officer or notary \_\_\_\_\_

Title of certifying officer \_\_\_\_\_

My commission expires (mm/dd/yyyy) \_\_\_\_\_

Certifying officer or notary, sign here

X

## County board of elections certification

If you are required to file your notice of candidacy with the State Board of Elections, you must have this certificate signed by the chairman of the board of elections or the director of elections of the county.

See G.S. 163-106.5.

I have examined the voter registration records in \_\_\_\_\_ County,

and found that \_\_\_\_\_:

☐ is a registered voter in this county

☐ is registered as \_\_\_\_\_ (indicate candidate's party affiliation or "unaffiliated", if applicable)

☐ has been affiliated with that party for at least 90 days as of the date of the filing of the notice of candidacy

9 ☐ (Superior Court or District Court Judge only) is a resident of superior court district \_\_\_\_\_ or district court district \_\_\_\_\_

Title of county official \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

Board chair or director of elections, sign here

X

## Candidate's certification

Fraudulently or falsely completing this form is a Class I Felony under Chapter 163 of the NC General Statutes.

I swear or affirm that the statements on this form are true, correct and complete to the best of my knowledge or belief.

Candidate, sign and date here (Required)

10

X

Sabrina Coone Godfrey

Date (mm/dd/yyyy)

12-06-2021

Sign and date this section in the presence of the certifying officer or notary from section 8.

Submit this form to the board of elections in the jurisdiction in which you plan to be a candidate.