

North Carolina Municipal Notice of Candidacy

Use this form to place your name on the ballot as a candidate in a municipal election

Election information	Title of the office sought TOWN OF KERNERSVILLE BOARD OF ALDERMEN 1 District or ward (if applicable) Election MUNICIPAL Election date (mm/dd/yyyy)
Candidate information You must provide your full fegal name in this section. This information will be public.	Last name PINNIX Suffix (Jr, Sr., II, III, IV) JR First name JOSEPH Middle name L Name to appear on ballot Joe Pinnix
Residential address This information will be public.	Address (not P.O. Box) 332 POST OAK RD Unit # City_KERNERSVILLE State_NC Zip_27284 County_FORSYTH
Mailing address This information will be public.	Same as above Address or P.O. Box P O BOX 878 Unit # City KERNERSVILLE State NC Zip 27285 County Corsyth State NC Zip 27285
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 party primary election to be held on (mm/dd/yyyy) I affiliate with the party primary election to be held on (mm/dd/yyyy) I affiliate with the party primary election to be held on (mm/dd/yyyy) I affiliate with the party primary election to be held on (mm/dd/yyyy) I affiliate with the party primary election to the of the party). 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
Felony disclosure	 Have you ever been convicted of a felony? Yes X 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. 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 Loseph L. Punnik , have been duly sworn, hereby state under oath that I have nickname De been commonly known by the nickname _for at least five years Complete only if you would and request that my name be placed on the ballot as follows: Oce Punnix like an acceptable nickname to appear on the ballot in lieu In the event that another candidate with the same last name as mine files notice of candidacy for the same office of your legal name. for which I am a candidate, my name should be listed as: Even if your nickname is State of North Carolina, accepted, your legal last County. name will still appear on the Thereby certify that Deseron L , the candidate who signed this Affidavit ballot. attesting to nickname, personally appeared before me this day and signed this document in my presence. 7 Sworn to and subscribed before methis day of 1021 Name of notary My commission expires (mm/dd/yyyy) Notary, sign here Х Acknowledgment of The notice of candidacy shall be either signed in the presence of the chairman or secretary of the board of notice of candidacy elections or the director of elections of that county, or signed and acknowledged before an officer authorized to take acknowledgments who shall certify the notice under seal. An acknowledged and certified notice may be This section must be mailed to the board of elections. completed by the chair, tor secretary, or director of the State of North Carolina, County. board of elections, or by a I hereby certify that Knain , the candidate who signed this notice of notary. candidacy, personally appeared before me this day and signed this document in my presence or acknowledged See G.S. 163-294.2(a) his/her signature to be the same. CO) Sworn to and subscribed before me this 8 Name of certifying officer or notary Title of certifying officer My commission expires (mm/dd/vyy) Certifying officer or notary, sign here X Candidate's 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) certification Date (mm/dd/yyyy) Fraudulently or falsely completing this form is a Class 7/2/2021 Q I Felony under Chapter 163 of the NC General Statutes. Sign and date this section in the presence of the chair, secretary, or director of the board of elections, or the notary from section 8.

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