



Election information	Title of the office sought TOWN OF LEWISVILLE MAYOR  1 District or ward (if applicable) LE  Election Municipal Election date (mm/dd/yyyy) 11/07/2023	
Candidate information You must provide your full legal name in this section. This information will be public.	Last name HORN Suffix (Jr, Sr., II, III, IV)  First name MICHAEL Middle name LEE  Name to appear on ballot Michael Lee (Mike) Horn  Campaign phone number (336) 414-4497 Campaign email MIKEH@HORNSTRONACH.COM	
Residential address This information will be public.	Address (not P.O. Box) 1125 FALLBROOK LN  City LEWISVILLE State NC zip 27023  County FORSYTH	
Mailing address This information will be public.	Same as above  4 Address or P.O. Box  City State Zip	
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	
Felony disclosure	Have you ever been convicted of a felony?  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	I, MICHAEL LEE HORN have been duly sworn be	ereby state under oath that I have been	
to nickname	commonly known by the nickname MIKE		
Complete only if you would like an acceptable nickname to appear on the ballot in lieu of your legal name.	and request that my name be placed on the ballot as follows: Michael Lee (Mike) Ho	for at least five years	
	In the event that another candidate with the same last name as mine files notice of can	On the state of th	
	for which I am a candidate, my name should be listed as:		
Even if your nickname is accepted, your legal last name will still appear on the ballot.	State of North Carolina, Facsym County.  I hereby certify that MCUAEL ICE Haw the cattesting to nickname, personally appeared before me this day and signed this document.	andidate who signed this Affidavit	
	attesting to nickname, personally appeared before me this day and signed this document	nt in my presence.	
	7 Sworn to and subscribed before me this day of June	4 , 2623	
	Name of notary DAISUKE TIM TSURI  My commission expires (mm/dd/yyyy) 06/22/268-4	NOTARY DUBLIC	
	Notary, sign here	My Commission Emires:	
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Acknowledgment of notice of candidacy This section must be completed by the chair, secretary, or director of the board of elections, or by a notary. See G.S. 163-294.2(a)	The notice of candidacy shall be either signed in the presence of the chairman or secretary of the board of 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 mailed to the 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.		
	Sworn to and subscribed before me this day of	LY , 2023	
	Name of certifying officer or notary DAISUKE TWO TSUS !!  Title of certifying officer NOTARY  My commission expires (mm/dd/yyyy) OG 22/2024	NY Commission Expires:	
	Certifying officer or notary, sign here	Great State of the	
	x	GICH COUNTRIES	
Candidate's certification	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)		
Fraudulently or falsely completing this form is a Class I Felony under Chapter 163 of the NC General Statutes.	9 X - //w///	Date (mm/dd/yyyy)	
	Sign and date this section in the presence of the chair, secretary, or director of the board section 8.  Submit this form to the board of elections in the county in which you plan to be a candidate.	of elections, or the notary from	