

North Carolina Municipal Notice of Candidacy

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

| Election information | Title of the office soughtTOWN OF WALKERTOWN TOWN COUNCIL 1 District or ward (if applicable)WT ElectionMunicipalElection 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 HUTCHINS Suffix (Jr, Sr., II, III, IV) First name WESLEY Middle name DEAN Name to appear on ballot Wesley D. Hutchins Campaign phone number (336) 817-1437 Campaign email WHUTCHINS@TRIAD.RR.COM | |
| Residential address This information will be public. | Address (not P.O. Box) 2605 CELESTE RD City_WALKERTOWN State_NC zip 27051 County_FORSYTH | |
| Mailing address This information will be public. | Same as above Address or P.O. Box PO BOX 46 City WALKERTOWN State NC Zip 27051 | |
| Candidate's pledge Check 1 box and complete the pledge that applies to the office that you are seeking candidacy for. | I hereby file notice as a candidate for nomination as in the | |
| elony 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 nickname | | , have been duly sworn, hereby s | tate under oath that I have been | | |
|--|---|--|---|--|--|
| Complete only if you would like an | | commonly known by the nickname | for at least five years | | |
| 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: | Files like til file sider samman likesam saman saman skala kala kan er geri och och personen se | | |
| | | 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: | | | |
| | | | | | |
| Even if your nickname is accepted, your legal last name will still appear on the ballot. | | 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. | | | |
| | 7 | Sworn to and subscribed before me thisday of | | | |
| | | Name of notary | | | |
| | | My commission expires (mm/dd/yyyy) | | | |
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| | | Natani alay hay | | | |
| | | Notary, sign here | | | |
| | | x | | | |
| | | The Part of the Control of the Contr | | | |
| Acknowledgment of notice of candidacy | | The notice of candidacy shall be either signed in the presence of the chairman or secretary of | the board of elections or the | | |
| his section must be completed by | | 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. | | | |
| ne chair, secretary, or director of | | State of North Carolina, County. | | | |
| he board of elections, or by a otary. See G.S. 163-294.2(a) | | Thereby certify that WCS leu Hutchins the candidate who signed this | | | |
| Total y. 366 0.3. 103-234.2(a) | | candidacy, personally appeared before me this day and signed this document in my presence or acknowledged h to be the same. | | | |
| | | 1 | ,2023 | | |
| | | day of and subscribed before the tills | · · | | |
| | 8 | 1 > 0 / 1 | | | |
| | | Name of certifying officer or notary Louise P. Lash | | | |
| | | Title of certifying officer Notary Public | 1011055110 | | |
| | | Title of certifying officer Notary Rublic My commission expires (mm/dd/yyyy) 07/05/2027 | LOUISE P. LASH | | |
| | | 8604-8 | NOTARY PUBLIC | | |
| | | | Forsyth County, N | | |
| | | Certifying officer or natary, sign here | Commission Expir | | |
| | | × Laure Plast | 07/05/2027 | | |
| | | years of Past | | | |
| andidate's | | I swear or affirm that the statements on this form are true, correct and complete to the best of my kno | wledge or helief | | |
| ertification | | Candidate, sign and date here (Required) | apa or wondt. | | |
| Fraudulently or falsely completing this form is a Class I Felony under | | 1 × 1/1 × 1 × 1 | Date (mm/dd/yyyy) | | |
| hapter 163 of the NC General | 9 | | 07/10/2023 | | |
| Statutes. | | Sign and date this section in the presence of the chair, secretary, or director of the board of elec | ctions, 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. | | | |
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