



North Carolina Municipal Notice of Candidacy

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

Election information

1 Title of the office sought TOWN OF WALKERTOWN MAYOR
District or ward (if applicable) WT
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.

2 Last name DAVIS Suffix (Jr, Sr., II, III, IV) _____
First name KENNETH Middle name REEVES
Name to appear on ballot Kenneth R Davis
Campaign phone number (336) 595-4212 Campaign email MAYOR@TRIAD.RR.COM

Residential address

This information will be public.

3 Address (not P.O. Box) 5170 SULLIVANTOWN RD
City WALKERTOWN State NC Zip 27051
County FORSYTH

Mailing address

This information will be public.

4 ☐ Same as above
Address or P.O. Box PO BOX 278
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.

5 ☐ 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 (and I certify that I am now registered on the registration records of the precinct in which I reside as an affiliate 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 TOWN OF WALKERTOWN MA (at large)
(for the _____ Ward) in the regular municipal election to be held in
(municipality) on (mm/dd/yyyy) 11/07/2023

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. 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.

7 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 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, FORSYTH County.

I hereby certify that KENNETH REEVES DAVIS, 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 7 day of JULY, 2023.

8

Name of certifying officer or notary Michelle Bobadilla

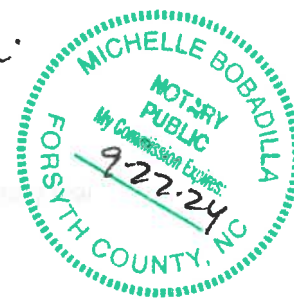
Title of certifying officer DEPUTY DIRECTOR

My commission expires (mm/dd/yyyy) 9.22.24

Certifying officer or notary, sign here

X

Michelle Bobadilla



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)

X

Kenneth Reeves Davis

Date (mm/dd/yyyy)

07/07/2023

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.