

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 CITY OF WINSTON-SALEM COUNCIL MEMBER WEST WARD District or ward (if applicable) WE Election Municipal Election date (mm/dd/yyyy) 03/05/2024		
Candidate information You must provide your full legal name in this section. This information will be public.	2	Last name CLARK Suffix (Jr, Sr., II, III, IV) First name ROBERT Middle name CUNNINGHAM Name to appear on ballot Robert C. Clark Campaign phone number (336) 416-0190 Campaign email ROBERTC@CITYOFWS.ORG		
Residential address This information will be public.	3	Address (not P.O. Box) 2815 COUNTRY CLUB RD City_WINSTON SALEM State_NC zip 27104 County_FORSYTH		
Mailing address This information will be public.	4	Same as above 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.	5	I hereby file notice as a candidate for nomination as CITY OF WINSTON-SALEM COUNCIL MEMBER WEST in the REPUBLICAN party primary election to be held on (mm/dd/yyyy) 03/05/2024 I affiliate with the REPUBLICAN 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 REPUBLICAN 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 (at large) (for the Ward) in the regular municipal election to be held in (municipality) on (mm/dd/yyyy)		
Felony disclosure	6	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.		

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Affidavit attesting		i,, have been duly sworn,	hereby state under oath that I have been	
to nickname		commonly known by the 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. 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)		and request that my name be placed on the ballot as follows:	ioi at least live years	
		In the event that another candidate with the same last name as mine files notice of ca	andidacy 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 the third that the third the third	e candidate who signed this Affidavit nent 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		
		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 CLARK , the candidate who signed this notice candidacy, personally appeared before me this day and signed this document in my presence or acknowledged his/her signatu to be the same. Sworn to and subscribed before me this day and signed this document in my presence or acknowledged.		
	8	Name of certifying officer or notary DASSULE TIM TOUTH Title of certifying officer Delector of Electrons	WE TIM TO	
		Title of certifying officer Officer of Electors	NOTARY F	
		My commission expires (mm/dd/yyyy) 6 22/2029	NOTARY PUBLIC My Commission Expires:	
		Certifying officer or notary, sign here	7000	
		x 2 3	THE COUNTY OF THE COUNTY OF THE PROPERTY OF TH	
andidate's ertification		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	9	x Called Clane	Date (mm/dd/yyyy) 12/04/2023	
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