



Election information		Title of the office sought				
Please print.		Election		Election date (mm/dd/yyyy)		
	1	If the office you are seeking has a district, enter the jurisdiction type (e.g. NC Senate) and district (Dist 10):				
		Jurisdiction		District		
Candidate information		Last name	Suffix (Jr, Sr., II, III	Suffix (Jr, Sr., II, III, IV)		
	2	First name		Middle name		
		Phone		Email		
Residential address		Address (not P.O. Box)	Unit #			
	3			State Zip		
		County				
Felony disclosure Provide the details of your felony convictions.	4	A felony conviction need not be discresulted in a pardon of innocence A prior felony conviction does not been restored. Offense	or expungement.			
Candidate's affirmation for felony disclosure Fraudulently or falsely completing this form is a Class I Felony under Chapter 163 of the NC General Statutes.	5	I affirm that the information disclosed here is true, correct, and complete to the best of my knowledge. Candidate, sign and date here (Required) Date (mm/dd/yyyy) The information on this form is public record. Submit this form to the same board of elections where you file your Notice of Candidacy form.				dd/yyyy)