

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 LEWISVILLE TOWN COUNCIL District or ward (if applicable) LE Election Municipal Election date (mm/dd/yyyy) 09/09/2025	
Candidate information You must provide your full legal name in this section. This information will be public.	2	Last name CHALLA Suffix (Jr, Sr., II, III, IV) First name AJAY Middle name VENKATSAI Name to appear on ballot Ajay Challa Campaign phone number (336) 437-8180 Campaign email AJAYGOLD@YAHOO.COM	
Residential address This information will be public.	3	Address (not P.O. Box) 992 WOODVIEW RIDGE TRL City LEWISVILLE State NC zip 27023 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 oledge that applies to the office that you are seeking candidacy for.	5	I hereby file notice as a candidate for nomination asTOWN OF LEWISVILLE TOWN COUNCIL_ in theREPUBLICAN party primary election to be held on (mm/dd/yyyy) 09/09/2025 I affiliate with theREPUBLICAN party (and I certify that I am now registered on the registration records of the precinct in which I reside as an affiliate of theREPUBLICAN 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		l,, have been duly sworn, hereby state under oath that I have been		
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.		commonly known by the nickname	for at least five years	
		and request that my name be placed on the ballot as follows:	A	
		In the event that another candidate with the same last name as mine files notice	ce of candidacy for the same office	
		for which I am a candidate, my name should be listed as:		
		State of North Carolina, County.	the candidate who signed this Affidavit	
		I hereby certify that 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 seal	
		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 director of elections of that county, or signed and acknowledged before an offic shall certify the notice underseal. An acknowledged and certified notice may be State of North Carolina, County. I hereby certify that Gay Challa candidacy, personally appeared before me this day and signed this document is to be the same. Sworn to and subscribed before me this day and signed this day of	er authorized to take acknowledgments who e mailed to the board of elections.	
	8	Name of certifying officer or notary Macy T. Pc. ye		
		Title of certifying officer A Wolntee Memor		
		My commission expires (mm/dd/yyyy) G7[14[2029]	MACY T PAYNE Notary Public, North Carolina Davidson County	
		Certifying officer or notary, sign here X	My Commission Expires	
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 ajay V. Clolon	Date (mm/dd/yyyy) 07/14/2025	
		Sign and date this section in the presence of the chair, secretary, or director of t section 8. Submit this form to the board of elections in the county in which you plan to be a		

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