

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 TOWN COUNCIL District or ward (if applicable) WT 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 LEIGHT . Suffix (Jr, Sr., II, III, IV) First name MARGARET Middle name GRAHAM Name to appear on ballot Peggy Leight Campaign phone number (336) 595-3552 Campaign email PLEIGHT336@YAHOO.COM
Residential address This information will be public.	3	Address (not P.O. Box) 5150 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 1259 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 hereby file notice as a candidate for nomination asTOWN OF WALKERTOWN TOWN COUNCIL in theDEMOCRATIC party primary election to be held on (mm/dd/yyyy)09/09/2025 I affiliate with theDEMOCRATIC party (and certify that am now registered on the registration records of the precinct in which reside as an affiliate of theDEMOCRATIC party). I pledge that 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 am defeated in the primary, 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 am a candidate for election to the office of (at large) (for the Ward) in the regular municipal election to be held in
Felony disclosure		(municipality) on (mm/dd/yyyy)
	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		ı, MARGARET GRAHAM LEIGHT , 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.		commonly known by the nickname PEGGY for at least five years
		and request that my name be placed on the ballot as follows: Peggy Leight
		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.	7	State of North Carolina, Torsyth County. I hereby certify that Margenet Le: Sht , the candidate who signed this Affidavit attesting to nickname, personally appeared before me this day and signed this document in my presence. Sworn to and subscribed before me this day of July 2025
		Name of notary Macy T. Have My commission expires (mm/dd/yyyy) 6711412029
		Notary, sign here MACY T PAYNE Notary Public, North Carolina Davidson County My Commission Expires 07/1/2/02-7
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 seat. An acknowledged and certified notice may be mailed to the board of elections. State of North Carolina, County. I hereby certify that Mary Aleicht, 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 day and signed this document in my presence or acknowledged his/her signature
	8	Name of certifying officer or notary May 7. Pere Title of certifying officer Av Sentee Magner My commission expires (mm/dd/yyyy) C7 [14] Zo29
		Certifying officer or notary, sign here X MACY T PAYNE Notary Public, North Carolina Davidson County My Commission Expires C77 August 197 August 197 Notary Public, North Carolina Davidson County My Commission Expires
 Candidate's		I swear or affirm that the statements on this form are true, correct and complete to the best of my knowledge or belief.
Candidate S Certification Fraudulently or falsely completing this form is a Class 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)
		Date (mm/dd/yyyy)
	9	x 07/14/2025
		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.

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