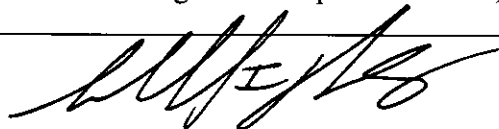


Statement of Intention of Candidacy - Nonpartisan

- This form must be submitted in person.
- This form must be completed by a candidate seeking nonpartisan office. Contact the receiving authority for filing deadlines.
- The S.C. Constitution prohibits a person who has been convicted of a felony from filing for public office for 15 years after the completion of the sentence, including probation and parole time, unless previously pardoned.

| | | | | | | | |
|---|--|---|--|---|-------------------------------|------------------------------|---|
| Name | | Marshall I. Pickens, III | | | | | |
| Office | | Anderson City Council, Seat 2 Unexpired term | | | | | |
| County or City | | City | | Election Date | | 7/7/26 | |
| Address | | 130 Victoria Cir | | City | | Anderson Zip 29621 | |
| Email Address | | electmp3@gmail.com | | | | | |
| Telephone | | Cell | | Home | | Work | |
| | | 864-844-5924 | | N/A | | N/A | |
| Voter Registration Number | | 044234285 | | | | | |
| Guidelines for a Candidate's Name to appear on the ballot | | | | | | | |
| <ul style="list-style-type: none"> ▪ A given name or a derivative may be used ▪ The name may not contain quotations, parentheses, or other distinguishing marks ▪ Nicknames are allowed if they are used in good faith for honest purposes and do not: <ul style="list-style-type: none"> ▪ Imply professional or social status ▪ Include an office or military rank ▪ Exceed 15 letters | | | | | | | |
| Name as you wish it to appear on ballot (please print) | | Marshall Pickens, III | | | | | |
| Candidate's Oath | | I affirm I meet, or will meet by the time of the general or special election, the qualifications for this office. | | | | | |
| Candidate's Signature | |  | | | | | |
| For use if candidate signs in presence of Notary Public | | | | | | | |
| Name of Notary Public | | | | | | My Commission Expires | |
| Signature of Notary Public | | | | | | Date | |
| To be Completed by Receiving Authority | | | | | | | |
| Election Official Signature | | Austin B. Cooley | | | Filing Fee Amount Paid | | 0 |
| Date Received | | Time Received | | <input type="checkbox"/> SEC <input checked="" type="checkbox"/> Anderson | | County Board | |
| 1/15/26 | | 2:30 pm | | | | | |