

# Declaration of Candidacy

## Party Primary Election

### For County Office

To be filed with the Board of Elections not later than 4 p.m. of the 90<sup>th</sup> day before the primary election.

R.C. 3513.05, .07, .08, .09, .10, .191, 3501.38

### Declaration of Candidacy

**NOTE - The candidate must fill in, sign and date this declaration of candidacy before the signatures of electors are affixed.**

I, \_\_\_\_\_, the undersigned, hereby declare under penalty of election falsification that  
Name of Candidate  
 my voting residence address is \_\_\_\_\_, Ohio \_\_\_\_\_,  
Street Number and Address, if any, (or rural route and number) City or Village Zip Code  
 and I am a qualified elector.

I further declare that I desire to be a candidate for nomination to the office of \_\_\_\_\_  
Office  
 in the County of \_\_\_\_\_, Ohio as a member of the \_\_\_\_\_ Party for the:  
County Political Party  
 Check  one  full term commencing \_\_\_\_\_ or  unexpired term ending \_\_\_\_\_, at the  
Full Term Commencing Date Unexpired Term Ending Date  
 primary election to be held on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

I further declare that, if elected to this office or position, I will qualify therefor, and that I will support and abide by the principles enunciated by the \_\_\_\_\_ Party.  
Political Party

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year \_\_\_\_\_  
Signature of Candidate

**WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE**

### Petition for Candidate

***This petition shall be circulated only by a member of the same political party as stated above by the candidate.***

We, the undersigned, qualified electors of the State of Ohio, whose voting residence is in the county, city, village, or township, set opposite our names, and members of the \_\_\_\_\_ Party, hereby certify  
Political Party  
 that \_\_\_\_\_, whose declaration of candidacy is filed herewith, is in our opinion,  
Name of Candidate  
 well qualified to perform the duties of the office or position to which the person desires to be elected.

**Signatures on this petition should be from only one county and must be written in ink. Signatures on this petition shall be of persons who are of the same political party as stated above by the candidate.**

Signature	Voting Residence Street Number and Address	City, Village, or Township	County	Date of Signing
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

