

Candidate's Preliminary Information

(Please Print Clearly)

Name: _____

Office Sought: _____

Area/District (if any): _____

Political Party: _____

(Only Applies to State/Federal Offices)

Incumbent: Yes

No

If Yes: Appointed

Elected

NOTE: The Election Division will publish one of the addresses below in the certified list of candidates on the county website. Please check the appropriate box to indicate which address you wish is to be used for this purpose. If no box is checked, the first address listed below will be published.

This form is for internal use only. Please complete all fields below with requested information or write N/A for not applicable. The only information that will be made public is the information with a check mark.

Residence Address: _____

Daytime Phone Number:

Mailing Address: _____

Evening Phone Number:

Business Address: _____

Email: _____

Website: _____