

WRITE IN CANDIDATE DECLARATION CLEARFIELD COUNTY

I, _____, announce that I am running a
Print Name as Registered

Write in campaign for the office of _____, **Office Seeking** (If running in a primary please also list party that you are seeking the nomination for)

For the term of _____ years, in the municipality of _____
Borough/Township/School District

, in the upcoming election.
District / Ward (if applicable) Date of Election

Please accumulate votes under the following names:
(We will NOT accumulate just a first or last name, first initial and last name, or anything that does not clearly indicate who the vote should be for).

EXAMPLES OF ACCEPTABLE VARIATIONS ON A NAME: Jonathan Doe, John Doe, Jon Doe, Jon A Doe, etc.

PLEASE NOTE: All write-in candidates are bound by the same laws and requirements as someone whose name appears on the ballot.

Campaign Finance Laws require you to file reports if you spend or receive over \$250.00 in a reporting period. In the event that you exceed that amount, you can contact the Clearfield County Election Office to request forms or can go to our Web site, www.clearfieldco.org, and use the link to print the appropriate forms.

Signature of Candidate

Date

Daytime phone number:

Return this completed form to:

Clearfield County Election Office, 212 E Locust Street, Clearfield PA 16830
(814)765-2642 Ext. 5053