

CITY OF LAKEWOOD

For Board of Elections use only - Do not write in this box		
Office Sought: _____		
Filing Fee	Signature Requirements	Last Filing Date/Time

Signatures Required: City Wide Offices - Fifty (50); Ward Council – Twenty five (25).

Last Filing Date: Not later than seventy-five (75) days before the date of the primary election.

NOTE: Candidates should refer to the charter of the municipality for complete instructions concerning nominations and elections.

DECLARATION OF CANDIDACY NONPARTISAN PRIMARY ELECTION

NOTE – THE CANDIDATE MUST FILL IN, SIGN AND DATE THIS DECLARATION BEFORE PETITIONS ARE CIRCULATED.

I, _____, the undersigned, hereby declare under penalty of election falsification
(Name of Candidate)

that my voting address residence in the City of Lakewood, Ohio is _____;
(Street Address) (Zip Code)

and I am a qualified elector. I further declare that I desire to be a candidate for nomination to the office of

_____ for the _____
(If Ward Council, must include the Ward) (Full Term Commencing or Unexpired Term Ending)

at the primary election to be held on the 8th day of September, 2009, if necessary, otherwise at the next general election.

Dated this _____ day of _____, 20 _____.

BOARD USE ONLY	
City, Ward & Precinct	
PARTY / YEAR	
SIGNATURE	
INITIALS	

(Print name as it should appear on the ballot)

(Signature of Candidate)

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

I, _____ hereby designate the persons named below a committee to represent me:
(Name of Candidate)

NAME	STREET ADDRESS

PETITION FOR CANDIDATE

We, the undersigned qualified electors of the State of Ohio, whose voting residence is in the City of Lakewood, set opposite our names, hereby certify that the above named, whose declaration of candidacy is filed herewith, is in our opinion, 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 (Must be written in ink)	PRINTED NAME OF SIGNER	STREET ADDRESS (Must be the address on file with the Board of Elections)	DATE OF SIGNING
1.			
2.			
3.			

SIGNATURES (Must be written in ink)	PRINTED NAME OF SIGNER	STREET ADDRESS (Must be the address on file with the Board of Elections)	DATE OF SIGNING
4.			
5.			
6.			
7.			
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19.			
20.			

CIRCULATOR STATEMENT – Must be completed and signed by circulator.

I, _____, declare under the penalty of election falsification that I am a qualified
(Printed Name of Circulator)

elector of the State of Ohio and reside at the address appearing below my signature; that I am the circulator
of the foregoing petition containing _____ signatures; that I witnessed the affixing of every signature;
(Number)

that all signers were to the best of my knowledge and belief qualified to sign; and that every signature is to the best
of my knowledge and belief the signature of the person whose signature it purports to be or of an attorney in fact
acting pursuant to section 3501.382 of the Revised Code.

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

(Signature of Circulator)

(Permanent residence address in this state)

(Municipality and Zip Code)

Acceptance of Nomination

_____, 20 ____

I hereby accept the within nomination.

Signature of Candidate

Address

City and Zip Code

BOARD USE ONLY		
	CAND	CIRC
C.W. & PRCT		
PARTY / YEAR		
SIGNATURE		
PROBLEM		
OK PETITON		
INITIALS		