November 2, 2021 Annua	al Municipal Election Dec	claration of Write-in Candidacy

District #: _____

Legal name of candidate – please print:

(Last name and suffix, if any)	(First name)	(Middle name or initial)
Voting Residence Address of Candidate: _		
_	(Street Name and Number - not P.O. Box)	(City, Town, or Plantation; Zip Code)
Mailing Address of Candidate:		
	(Complete if different from above add	ress)
Party or Political Designation:	none (n/a)	NO O O O O O O O O O
Qualifications of Representative to the	(See "Write-In Candidate Requirement	
At the time of nomination for placement Be a resident in the district which t	nt on the general election ballot, the	
 At the commencement of the period fo Have been a citizen of the United S Be at least 21 years of age; Have been a resident of this State a Have been a resident in the district preceding the election. 	States for at least 5 years; It least one year; and	for the 3-month period immediately
I hereby declare my consent to accept the municipality listed above; that I meet the distrue.	-	
	(Signa	ture of Candidate)
Subscribed to and sworn before me on	this date:	
	(Date)	(Signature of Notary Public)
		(Printed Name of Notary Public)
Certification of Voter Registration	Completed by Registrar in Candi	date's Municipality of Residence
I hereby certify that		is registered to vote
in this municipality as of this date.	(Name of Candidate)	
	(Signature of Re	egistrar/Municipal Clerk)
(Date)		vn, City or Plantation)
8	f Write-in Candidacy is 4:30 pm o lays before the General Election)	n rriday, september 3, 2021