

WASHINGTON COUNTY BOARD OF ELECTIONS

Name: _____
Last First Middle Suffix

Residential Address: _____

City: _____ State: _____ Zip Code: _____

Election District (voting precinct name): _____

Mailing Address (if different from residential): _____

City: _____ State: _____ Zip Code: _____

E-mail address: _____

Office seeking Nomination: _____

Political Party: _____

Name as it is to appear on the Ballot: _____

CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA }
COUNTY OF WASHINGTON } SS:

I do swear or affirm that my residence, my election district, and the title of the office for which I desire to be a candidate are as specified above, that I am a duly registered and enrolled member of the political party referred to above and that I am eligible for said office, that I will not knowingly violate any election law, or any law prohibiting corrupt practices in connection therewith.

Sworn to and subscribed before me this
_____ day of _____, 20 _____

I swear or affirm to the above part(s) as required by the
law(s) applicable to the office I am seeking.

Signature of Notary Public

Signature of Candidate

My commission expires: _____

Phone Number

Election District
(voting precinct)

OFFICE USE ONLY

Political Party: _____

Number of Petition Sheets: _____



Date/Time Received