

**DECLARATION OF CANDIDACY
PARTY PRIMARY ELECTION FOR DISTRICT OFFICE
Judge of the Court of Appeals, State Senator or State Representative**

To be filed with the Board of Elections of the most populous county or part county of the district not later than 4 p.m. of the 75th day before the day of the primary election, or 4 p.m. of the 60th day before the day of the presidential primary election.

Revised Code 3513.05, .07, .08, .09, .10, .191; 3501.38

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

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

election falsification that my voting residence address is _____,
(Street and Number, if any, or Rural Route Number)

_____, Ohio _____, and I am a qualified elector.
(City or Village) (Zip Code)

I hereby declare that I desire to be a candidate for nomination to the office of _____
_____ as a member of the _____ Party
from the _____ District for the: full term commencing _____
(Number of District)(Appellate, State Representatives or State Senate) (Check one box and fill in the appropriate date)

or unexpired term ending _____, at the primary election to be held on the _____
day of _____, _____.

I hereby declare that, if elected to this office or position, I will qualify therefor, and I will support and abide
by the _____ Party..

Dated this _____ day of _____, _____.

(Signature of Candidate)

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

PETITION FOR CANDIDATE

(This petition shall be circulated only by a member of the same political party as stated above by the candidate)

We, the undersigned qualified electors of the State of Ohio, whose voting residence is in the county, city,
village, or township, set opposite our names, and members of the _____ Party, hereby certify that
_____, whose declaration of candidacy is filed herewith, is in our
(Name of Candidate)

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 on this
petition shall be of persons who are of the same political party as stated above by the candidate.**

SIGNATURE	VOTING RESIDENCE ADDRESS STREET AND NUMBER	CITY, VILLAGE OR TOWNSHIP	COUNTY	DATE OF SIGNING
1.				
2.				
3.				
4.				
5.				
6.				

