

|              |  |  |
|--------------|--|--|
| Candidate ID | This form is a worksheet. It is provided to expedite the filing process and is not an official document. The CERTIFICATE OF CANDIDACY is the official candidacy filing document. | This column is for<br>FOR BOARD USE ONLY |
| Voter ID     |  |  |

**ELECTION INFORMATION**

|                              |   |   |                      |                  |   |
|------------------------------|---|---|----------------------|------------------|---|
| Election Year                | 1 | <u>  </u> <u>  </u> <u>  </u> <u>  </u> <u>  </u> | Primary Election     | General Election |   |
| Office Sought                | 2 |   | Local                | State            | Federal   |
| District Running In          | 3 |   |                      |                  | <input type="checkbox"/> Verified                   |
| FOR CONGRESSIONAL RACES ONLY | 4 | District living in:                               | District running in: |                  | <input type="checkbox"/> number 4 matches number 11 |
| Party Affiliation            | 5 |   |                      |                  |   |

**CANDIDATE INFORMATION**

|                                  |    |   |   |
|----------------------------------|----|---|---|
| Legal Name as registered to vote | 6  | First Name _____<br>Middle Name or Initial _____<br><small>(if applicable)</small><br>Last Name _____ Jr Sr II III IV   | <input type="checkbox"/> Financial Disclosure<br><input type="checkbox"/> Statement of Organization<br><input type="checkbox"/> Identification<br><input type="checkbox"/> Filing Fee<br><input type="checkbox"/> Alternate Name Affidavit<br><input type="checkbox"/> Ethics Email Receipt<br>Ethics employee: _____ |
| Name to Appear on Ballot         | 7  | First Name _____<br>Middle Name or Initial _____<br>Last Name _____<br><small>(if applicable)</small><br>Jr Sr II III IV  | Initial if different from legal name<br><div style="border: 1px solid black; width: 100px; height: 40px; margin: 5px;"></div>   |
| Additional Information           | 8  | Birthdate <u>  </u> <u>  </u> <u>  </u> / <u>  </u> <u>  </u> <u>  </u> / <u>  </u> <u>  </u> <u>  </u> <u>  </u> <u>  </u> <u>  </u> <u>  </u> <u>  </u> Gender: M F | <input type="checkbox"/> Gender match to voter registration   |
| Phone                            | 9  | Contact (for board) _____<br>Public _____   |   |
| Public Email                     | 10 |   |   |
| Residence Address                | 11 | Address _____<br>City/Town _____<br>State MD Zip Code _____<br>County _____   | <input type="checkbox"/> number 11 matches number 4<br><br>Method of Payment:<br><input type="checkbox"/> Visa<br><input type="checkbox"/> MasterCard<br><input type="checkbox"/> Check # _____   |
| Public Mailing Address           | 12 | Same as above<br>Address or P.O. Box _____<br>City/Town _____<br>State _____ Zip Code _____   | Election District _____<br>Precinct _____   |
| Public Web and Social Media      | 13 | website URL _____<br>Facebook _____<br>Twitter _____<br>other social media _____  | CCF ID# _____<br>FEC# _____<br>SBE/LBE Staff: _____   |