

**DECLARATION OF CANDIDACY  
PARTY PRIMARY ELECTION FOR DISTRICT OFFICE  
Representative to Congress**

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 75<sup>th</sup> day before the day of the primary election, or 4 p.m. of the 60<sup>th</sup> 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  
(Name of Candidate)  
of election falsification that my residence address is \_\_\_\_\_,  
(Street and Number, if any, or Rural Route Number)  
\_\_\_\_\_, Ohio \_\_\_\_\_.  
(City or Village) (Zip Code)

I hereby declare that I desire to be a candidate for nomination to the office of Representative to Congress as a member of the \_\_\_\_\_ Party from the \_\_\_\_\_  
(Number of District)  
District for the: (check one box)  full term, or  unexpired term ending \_\_\_\_\_,  
(Fill in the appropriate date)  
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.  
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  
(Name of Candidate)  
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 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.				
7.				

SIGNATURE	VOTING RESIDENCE ADDRESS STREET AND NUMBER	CITY, VILLAGE, OR TOWNSHIP	COUNTY	DATE OF SIGNING
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				

**CIRCULATOR STATEMENT – Must be completed and signed by circulator.**

I, \_\_\_\_\_, declare under penalty of election falsification that I am a  
 (Printed Name of Circulator)  
 qualified elector of the State of Ohio and reside at the address appearing below my signature; that I  
 am a member of the \_\_\_\_\_ Party; that I am the circulator of the foregoing petition  
 containing \_\_\_\_\_ signatures; that I witnessed the affixing of every signature; that all signers were  
 (Number)  
 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)  
 \_\_\_\_\_  
 (City or Village and Zip Code)

**County Board of Elections**  
 Form 2-E – Declaration of Candidacy of

Candidate for \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Filed \_\_\_\_\_

**Certificate of Validity**  
 REVISED CODE 3501.11

We, the undersigned members of the Board of Elections of this county, certify that we have reviewed and examined the foregoing petition and find it to be sufficient and valid, and caused our signatures and official seal to be

Affixed at \_\_\_\_\_, Ohio,  
 This \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
 Chairperson

\_\_\_\_\_  
 Member

\_\_\_\_\_  
 Member

\_\_\_\_\_  
 Member

\_\_\_\_\_  
 Member

\_\_\_\_\_  
 Director (seal)