State of West Virginia PRECANDIDACY REGISTRATION FORM

For All Statewide, Legislative, County and Municipal Offices

I will accept contributions and spend money toward my possible candidacy for public office, as permitted by West Virginia Code §3-8-5e.

Date: Office :		District #:	Political Party:
Name:			Election Year:
Residence Address:			
City:	_, WV Zip Code:		County:
Telephone: (home)		(work)	
Mailing Address:			
Email:			
Committee Name:			
My treasurer or financial age NOTE: A judicial candidate cann	nt will be:		
Name:			
Residence Address:			
City:	State:	Zi	p Code:
Telephone: (home)	((work)	
Mailing Address:			
Email:			
• •	s finances via an inte	rnet service prov	Reporting System which will allow vided by the Secretary of State.
requirements of the WV Code ar	nd the Rules & Regula document will serve a	ations promulgat	lidacy or candidacy is subject to the ed by the Secretary of State, including electronically filed reports associated
Precandidate's signature	 }	т	reasurer's Signature



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File this form with Secretary of State if a candidate for statewide, legislative, or multi-county judicial office.

File this form with **County Clerk** if a candidate for county office or single-county judicial office.

File this form with Municipal Clerk/Recorder if a candidate for municipal (city or town) office.

> Offical Form F-1 Revised 10/13