

**DECLARATION OF INTENT TO BE A WRITE-IN CANDIDATE**  
**ALL OFFICES EXCEPT ANY FEDERAL OFFICE AND GOVERNOR AND LIEUTENANT GOVERNOR**  
Revised Code 3513.041

To be completed, signed by the candidate named herein, and filed with the appropriate county board of elections or, if the office is to be voted on statewide, the Secretary of State's Elections Division, not later than 4 p.m. of the 62<sup>nd</sup> day before the primary or general election, whichever is appropriate. Filing must be accompanied by the fees indicated in R.C. 3513.10.

I, \_\_\_\_\_, the undersigned, declare under penalty of  
(Legal name of candidate)  
election falsification that my qualifying voting residence address is \_\_\_\_\_,  
(Street and number or Rural Route #)  
\_\_\_\_\_, Ohio \_\_\_\_\_.  
(City or Village) (Zip Code)

I possess the necessary qualifications to be a candidate for the office of \_\_\_\_\_ for:  
(Check one box and fill in the appropriate date)  full term commencing \_\_\_\_\_, or  unexpired  
term ending \_\_\_\_\_, in the \_\_\_\_\_.  
(Identify the State, district, county, etc. of the office)

I declare that I am an elector qualified to vote for the office I seek. I desire to be a write-in candidate for

(complete one of the following three options):

Nomination of the \_\_\_\_\_ Party at the primary election to be held  
(Name of Political Party)  
on the \_\_\_\_\_ day of \_\_\_\_\_,  
(Month) (Year)

Election at the general election to be held on the \_\_\_\_\_ day of \_\_\_\_\_,  
(Month) (Year)

Election to the office of member of county central committee of the \_\_\_\_\_  
(Name of Political Party)  
Party at the primary election to be held on \_\_\_\_\_ day of \_\_\_\_\_,  
(Month) (Year)

X \_\_\_\_\_  
(Signature of Candidate)

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