## **DECLARATION OF CANDIDACY**

Notice: All information provided on this form will be made publicly available.

PLEASE TYPE OR PRINT

Name of	Candidate as It Will Appear on Ballot
7	Full Legal Name of Candidate
Title of Office Sou	ght (including district, office or ward if applicable)
Candidate's	Address of Residence – Street, City
Candidate's Ma	iling Address – Street or Box, City, State, Zip
Telephone Number (Optional)	Email Address (Optional) Website Address (Optional
Party Candidate	Independent Judicial
	of Political Party
I am a registered voter in	Precinct County
	700 200 X
Date of Birth	
Month, Day	/, Year
a misdemeanor involving embezzieme for a misdemeanor involving embezzi check yes below, you must complete to I, the undersigned, do hereby so correct, that I have read the qualific	of proper authority in the State of Oklahoma or in another state to be guilty of int or of a felony, or at this time is there an outstanding warrant for your arrest ement or for a felony in the State of Oklahoma or in another state? If you he Criminal History Disclosure Supplement form.  No  No  No  lemnly swear or affirm that the abovementioned facts are true and sations for the office that I seek, that I am fully qualified to become nat I will be fully qualified to hold said office, if elected.
_	Signature of Candidate
State of	County of
	e me
My Commission expires	Commission Number
SEAL	Signature of Notary Public or Officer Authorized to Administer Oath
	Title of Officer (Notary Public or Other Officer)

Name of Candidate:	Title of office sought:
Criminal History Disclosure Supple	ment to Declaration of Candidacy
If you have been determined by a court of proper aut state to be guilty of a misdemeanor involving embezz outstanding warrant for your arrest for a misdemeanor State of Oklahoma or in another state, you must comform.	zlement or of a felony, or at this time there is an or involving embezzlement or for a felony in the
Name of offense	
Date of conviction or issuance of outstanding warran	ıt .
Time prescribed in judgement and sentence	
County and State of conviction or issuance of outsta	nding warrant
Name of offense	
Date of conviction or issuance of outstanding warran	t
Time prescribed in judgement and sentence	
County and State of conviction or issuance of outsta	nding warrant
Name of offense	
Date of conviction or issuance of outstanding warran	ıt
Time prescribed in judgement and sentence	
County and State of conviction or issuance of outsta	nding warrant
If more space is needed, use more than one copy of this form.	Page of

## Voluntary Form for News Media

You are not required to complete this form in order to become a candidate for office. If you elect to complete this form, it will be distributed to the news media by the election board at the time your Declaration of Candidacy is accepted.

Date			
Name			
Office Sought	Political Affiliation _		
Home Address	Home Phone		
City	ZIP _		
E-mail Address	Cell Phone _		
Website			
Date of Birth	Age_		
Place of Birth			
Parents' Names (Include mother's maiden name)			
Brothers and Sisters (Include cities of residence) _			
Positional Name			
Business Name			
Business Address			
City			
Currently Employed by (Dates)			
Previously Employed by (Dates)			
Previously employed by (Dates)			
Education (Where; When; Degree, if any)			

## Page 2 of 2

Name
Previous Races Run (Dates, outcomes)
Previous Governmental/Political Party Experience
Memberships in Professional, Civic, Military and Other Organizations
Honors, Awards, etc
Marital Status
Spouse's Name (If wife, maiden name)
Names and Ages of Children
Spouse's Current Occupation/Profession (Dates)
Spouse Currently Employed by (Dates)
Spouse Previously Employed by (Dates)
Campaign Headquarters Phone
Campaign Consultant's Name
Advertising Consultant's Name
Campaign Manager's Name
Campaign Manager's Occupation/Employer
Campaign Manager's Business Phone
Campaign Manager's Home Phone
Campaign Treasurer's Name
Campaign Treasurer's Occupation/Employer
Campaign Treasurer's Business Phone
Campaign Treasurer's Home Phone