



GREENE COUNTY REPUBLICAN COMMITTEE



Hardcopy Pre-File Form and Statement of Qualifications

I, _____, hereby indicate my intention to seek election
FULL NAME AS SHOWN ON OFFICIAL VOTER REGISTRATION
as a Republican Candidate for Commonwealth Attorney of Greene County Virginia at the upcoming Mass Meeting of the Greene County Republican Committee of the Republican Party of Virginia on May 6th, 2019.

In accordance with the Qualifications for Participation set forth in the Official Call and Article I of the Plan of Organization, I also do hereby certify that I am a registered voter in Greene County, Virginia, that I am a member of the Bar of the Commonwealth of Virginia, I am in accord with the principles of the Republican Party, and I intend to support the Nominees of the Republican Party in the ensuing election.

Enclosed is a check for the requested **\$200** non-refundable filing fee, **made payable to the Greene County Republican Committee**, to help defray the costs of my election.

Signature _____ Date _____

Print Name _____

Address _____

City _____ Virginia, Zip Code _____

Virginia Bar License Number _____

Cell Phone: _____ Home Phone: _____

E-mail _____

Please complete this form and return it by mail to: Greene County Republican Committee, P.O. Box 933, Stanardsville, VA 22973. **This form and filing fee must be received not later than 6:00pm EDT, March 28th, 2019, and postmarks will not govern. Hand deliveries and/or email copies will not be accepted.**