



Smyth County Republican Party

Adam L. Tolbert, Chairman

www.SmythGOP.org

DECLARATION OF CANDIDACY TO SEEK NOMINATION

I, _____ (full legal name) do hereby declare my candidacy to seek the nomination as the Republican candidate for (check as appropriate):

CONSTITUTIONAL OFFICES (\$200.00 filing fee)

___ Commonwealth's Attorney ___ Sheriff
___ Treasurer ___ Commissioner of the Revenue

---OR---

BOARD OF SUPERVISORS (\$50.00 filing fee)

___ Atkins District ___ North Fork District ___ Park District ___ Rye Valley District

at the Party Canvass to be held on **Saturday, June 1, 2019.**

I do hereby further certify that I am a registered voter of Smyth County and, if seeking a nomination for Board of Supervisors, a registered voter in the district for which I am seeking the nomination. My current registered voting address and phone number are as follows:

Street: (number & name)	P.O. Box: (if one)
City, State, Zip Code:	
Phone Number:	E-Mail Address: (if one)

Please READ CAREFULLY and initial EACH of the following statements:

____ I declare that I am in accord with the principles of the Republican Party and plan to support the nominees of the Republican Party in the ensuing general election.

____ I agree not to seek the office as an independent candidate should I not win the Republican Nomination.

Paid for & Authorized by the Smyth County Republican Committee

Please READ CAREFULLY and initial ONE of the following statements:

_____ I have not participated in the nominating process of another party, or supported a candidate in opposition to a Republican nominee, in the last five years.

---OR---

_____ I have participated in the nominating process of another party, or supported a candidate in opposition to a Republican nominee, in the last five years, but I renounce affiliation with any party other than the Republican Party, intend to support the nominees of the Republican Party in the future and understand that the Smyth County Republican Committee shall provide a copy of this signed renunciation statement to the Republican Party of Virginia, to be maintained for a period of 5 years.

Please READ CAREFULLY and PRINT, SIGN, AND DATE BELOW:

I agree that I will meet with officials from the Smyth County Republican Committee prior to date of the party canvass if a meeting is requested.

I also agree that if I am the successful Republican nominee and win the office in the General Election, I will adhere to the following principles:

- ❖ A candidate owes the Smyth County Republican Committee loyalty and due consideration in matters of the office represented.
- ❖ Nominees and office holders of the Smyth County Republican Committee must attend monthly meetings and other functions regularly in order to keep the Committee informed of the business of the County and seek Committee counsel as warranted.

I have attached the appropriate candidate filing fee hereto by check. I understand filing fees are non-refundable once remitted. *Check # _____**

I do hereby certify that all the information provided by me on this statement is true and accurate to the best of my knowledge.

Printed Name

Signature

Date Completed: _____

Return form by postal mail or in-person to:

Jeff Hutton
Candidate Filing Coordinator
143 Cemetery St.
Marion, VA 24354
(276) 783-4309 (phone)

DEADLINE FOR RECEIPT: Friday, May 17, 2019 at 5:00PM ET

**NO FORMS WILL BE ACCEPTED AFTER THIS TIME. POSTMARKS DO NOT GOVERN!
SEE CALL TO PARTY CANVASS FOR FURTHER REQUIREMENTS**