

CERTIFICATE OF CANDIDATE QUALIFICATION
62nd Virginia Legislative District

YOU MUST FILE THIS FORM WITH THE 62nd LEGISLATIVE DISTRICT REPUBLICAN COMMITTEE CHAIRMAN BY THE FILING DEADLINE. FAILURE TO DO SO MAY RESULT IN YOUR DISQUALIFICATION.

Pursuant to § 24.2-501 of the *Code of Virginia*, I hereby certify that:

1. I am a citizen of the United States. YES NO
2. I am at least eighteen years of age or will be on or before the date of the election for the office I am seeking. YES NO
3. I have been a resident of the Commonwealth of Virginia for the year immediately preceding the election for the office I am seeking. YES NO
4. I now reside at the address shown below in the *county or city and, if applicable, district in which I seek office [residence address must be given; post office box or general delivery **is not** acceptable]:

STREET AND NUMBER RURAL ROUTE AND BOX NUMBER OR HIGHWAY ROUTE NUMBER

City/Town _____ ZIP _____

[:] If town, also list County of residence _____

5. I am registered to vote at the above address in the precinct in which I reside. YES NO
 [or my application for registration, transfer, or change of address is on file in the general registrar's office]
6. Have you ever been convicted of a felony or any other crime that would preclude you from holding office? (See, e.g., § 18.2-472) YES NO
7. Have you ever been adjudicated mentally incompetent and lost your right to vote? YES NO
8. If you answered YES to 6, give date of certificate restoring voting rights.
 If YES to 7, give date of court order restoring competency. DATE OF RESTORATION
9. I am an attorney admitted to the bar of the Commonwealth. YES NO
 (Answer only if seeking office of Commonwealth's Attorney)

PLEASE TYPE OR PRINT LEGIBLY ALL THE FOLLOWING INFORMATION:		OFFICE SOUGHT	
YOUR NAME AS IT IS TO APPEAR ON BALLOT		DISTRICT	
MAILING OR CAMPAIGN ADDRESS		SOCIAL SECURITY NUMBER	
		ELECTION DATE	
		CHECK ONE	<input type="checkbox"/> Republican Primary <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> General Election
E-MAIL ADDRESS		HOME TELEPHONE	
WEB ADDRESS		BUSINESS TELEPHONE	

I do solemnly swear [or affirm] subject to penalty provisions for making false statements that the information given above is true and correct and that I am qualified to vote for and hold the office for which I am a candidate.

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEALSTAMP BELOW

 SIGNATURE OF CANDIDATE

 DATE

State of _____ County/City of _____

The foregoing instrument was subscribed and sworn before me this day of _____, 20____ by _____.

 SIGNATURE OF NOTARY OR CLERK OF CIRCUIT COURT

 NOTARY REGISTRATION NUMBER

 DATE NOTARY COMMISSION EXPIRES

How Candidate Names May Appear on the Ballot

Candidate names for all offices except President/Vice President must use these criteria:

Criteria

First name or initial First name or initial or familiar form of first name

Middle name or initial Middle name or initial or familiar form of middle name

(Initials may be used in lieu of either the first or middle name or both)

“Nickname” (optional) Must be in double quotation marks, if used

Last name Last name as it appears on the candidate’s voter registration record

Suffix Must be used if included on the candidate’s voter registration record

Notes

Title: Do not include a title before or after the name. Examples of titles include: Rev., Dr., Mrs., Mr., etc.

First or Middle Name: The first or middle name must be the candidate’s given name, not a spouse’s.

EXAMPLE: Mary L. Jones not Mrs. John W. Jones

Length: The full candidate name must fit on a single line of the ballot.

Exceptions: If the candidate name cannot meet the above requirements because it will not fit on a single line or there is no middle name – or for any other reason – contact the Department of Elections for acceptable accommodations.

Examples

Candidate’s full name is **Robert Eugene Williams, Jr.** (*not all possible combinations are represented*)

Robert Eugene Williams, Jr. Robert E. Williams, Jr. Robert Gene Williams, Jr.

Rob Eugene Williams, Jr. Rob E. Williams, Jr. Rob Gene Williams, Jr.

Robbie E. “Blue Jeans” Williams, Jr. R. E. Williams, Jr. R. E. “Blue Jeans” Williams, Jr.

President/Vice President

Presidential and vice-presidential candidate names appear on the ballot as specified to the State Board by the nominating party or candidate.

SOCIAL SECURITY NUMBER

Your social security number is part of your official voter record. It is required on this form only to make it possible to identify your registration record in order to qualify you as a candidate. The General Registrar or Department of Elections, when copying this document for public inspection, must redact the social security number.

RETURN TO

Return to the 62nd Legislative District Republican Committee Chairman by filing deadline.

Should you have questions relating to your candidacy, please do not hesitate to call:

Anthony Jewett at (540) 718-0057