## DECLARATION OF WRITE-IN CANDIDACY FOR THE NOVEMBER 2, 2010 GENERAL ELECTION

Name of Candidate:		
	(Please print. Name must appear the s	same as the signature of Candidate's Consent below.)
Office:		
		ample: Representative to the Legislature)
Electoral Division:		
	(Name of Electoral Divis	sion – For Example: House District #1)
Term of Office:	N/A	
	(See Title 2	1-A, §335 (1) (A))
Party or Political Designation	(Saa "Write In Candida	ate Requirements" for further instructions.)
	(See Write-III Candida	the Requirements for further instructions.)
Address of Candidata		
Address of Calididate.	(Street Address – not P.O. Box)	(City, Town or Plantation; State; Zip Code)
Mailing Address of Candidate:		
	(To be completed if different from residence address above)	
	CANDIDATE'S (	CONCENT
	CANDIDATE'S	CONSENT
	hold this office, and that this de	
	Subscribed to and swor	rn before me on this date:
(Signature of Candidate)		(Signature of Notary Public)
(Candidate's Municipality of Re	sidence)	(Printed Name of Notary Public)
		OATE'S ENROLLMENT  in the candidate's municipality of residence
I hereby certify that	(Name of Candidate)	is registered to vote
	(Name of Candidate)	
in this municipality as of this	date.	
		(Signature of Registrar/Municipal Clerk)
(Date)		(Name of Town, City or Plantation)

This form must be submitted to the Department of the Secretary of State, Division of Elections and Commissions, no later than 5 p.m. on <u>Monday, September 20, 2010</u> (45 days before the General Election).