

STATE OF IOWA
Affidavit of Candidacy
CITY ELECTION

This Affidavit of Candidacy must be filed with your nomination petition.

For the Office of _____ District /Ward # _____ (If applicable)

Check if election is to fill a vacancy.

(This means the office is on the ballot before the end of the regular term; because of a death or resignation.)

Name _____

(EXACTLY as you want it to appear on the ballot. Do not include titles, parentheses or quotation marks.)

Name Pronunciation (*sounds like*) _____

(This information is helpful during the recording of audio ballots. Audio ballots are available for people with disabilities.)

Home Address _____

Street Address

City

State

ZIP

County _____ **Date of Election** _____

***E-mail** _____ ***Phone** _____

***NOTE:** This information is optional and WILL be published if it is provided.

I swear or affirm that the information I have provided above is correct. I am a candidate for the office indicated above and request that my name be printed on the official ballot for this election. I am eligible to hold the office for which I am a candidate; if I am elected I will qualify by taking the oath of office. I know that I cannot hold a public office if I have been convicted of a felony or other infamous crime and my rights have not been restored by the governor or by the president of the United States.

I know that I am required to organize a candidate's committee, which shall file an organization Statement and disclosure reports if my committee or I receive contributions, make expenditures, or incur indebtedness in excess of seven hundred and fifty dollars (\$750) in a calendar year for the purpose of supporting my candidacy for public office.

I know that I cannot be a candidate for more than one office to be filled at this election. If I have filed nomination papers for more than one office I must file with the officer who accepted my nomination papers an affidavit indicating for which office I choose to be a candidate. I understand that if the affidavit is not filed by the last day candidates can file nomination papers, I cannot be a candidate for any office on the ballot at this election.

Candidate's Signature _____

Candidate **must** sign this affidavit in the presence of a Notary Public

State of _____ County of _____

Signed and sworn to (or affirmed) before me on _____

Date

by _____

Print Candidate's Name

*Notary
Stamp Here*

Signature of Notary Public