

AUTHORIZATION TO PICK-UP CANDIDATE FILING DOCUMENTS

GENERAL ELECTION

Election Date: November 5, 2024

Candidate's Name:

As registered to vote: _____

Residence Address: _____

Mailing Address: _____

(If different)

Contact Info: _____

Day Phone Number

Evening Phone Number

_____ E-Mail

Office Sought:

District Name: _____

Division No./Trustee Area/Seat No.: _____

(If Applicable)

Specify Term: _____ Full Term/4 years

_____ Short Term/2 years

(This is not applicable to all districts)

I authorize the following person(s) to act as my representative to obtain the necessary forms for my candidacy to the above-referenced office:

Name Phone Number

Name Phone Number

Filing Dates:

Filing Period..... July 15 - August 9, 2024

Required for all offices with terms ending in 2024

Write-In Filing Period..... September 9 - October 22, 2024

I am aware of the filing dates. The forms must be completed and received by the Registrar of Voters no later than 5 p.m. on the deadline date.

(A postmark is not acceptable.)

Date

Candidate's Signature