

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
Bureau of Elections

MPP

MINOR POLITICAL PARTY CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

SS:

COUNTY OF _____

CANDIDATE'S AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the name of the office for which I desire to be a candidate are as specified below, that I am eligible for said office, and that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; that my name has not been presented as a candidate by nomination petitions for any public office to be voted for at the ensuing primary election, nor have I been nominated by any other nomination papers for any such office; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit. (A candidate for the office of judge of the court of common pleas, judge of the Philadelphia Municipal Court, school director or justice of the peace (magisterial district judge) may swear or affirm to the above Candidate's Affidavit, if the candidate presented his or her name by nomination petition(s) in a primary and was successfully nominated by a party or parties in such primary for the same office as set forth below.)

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Sworn (or affirmed) and subscribed before me this

_____ day of _____,

20_____.

(SEAL)

(Signature of Person Administering Oath)

My Commission Expires _____

Office/District

Signature of Candidate

Printed Name of Candidate

Name as it is to appear on the Ballot

Street Address/Post Office/Zip Code

City/Borough/Township County

Election District of Candidate (District Where Registered To Vote)

Telephone Number

Email Address

OFFICE USE ONLY

COUNTY CODE \$ _____ M

F [] []

AMOUNT RECEIVED

[][][] [][][] [][][] [][][][][][]

OFFICE DISTRICT POLITICAL PARTY NUMBER OF PAPERS

