

COMMONWEALTH OF VIRGINIA  
**DECLARATION OF CANDIDACY**

I, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME SUFFIX, IF ANY

RESIDENT ADDRESS \_\_\_\_\_

of the city/county/town of \_\_\_\_\_, hereby declare myself to be a candidate for the office of \_\_\_\_\_ in the \_\_\_\_\_

ENTER CONGRESSIONAL, STATE SENATE OR HOUSE, OR LOCAL DISTRICT, IF APPLICABLE; OTHERWISE LEAVE BLANK

District in the election to be held on \_\_\_\_\_, 20 \_\_\_\_\_. [CHECK ONE SQUARE BELOW]

- General                                       Special  
 Democratic Primary                       Republican Primary

If I am a candidate in a primary and am defeated in the primary, my name is not to be printed on the ballots to be used in the succeeding general election for the same office.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

SIGNATURE OF CANDIDATE		(AREA CODE) HOME TELEPHONE	
PRINTED NAME OF CANDIDATE		(AREA CODE) BUSINESS TELEPHONE	
MAILING ADDRESS			
CITY/TOWN/STATE/ZIP+ 4			

THIS DECLARATION MUST BE ACKNOWLEDGED BEFORE A NOTARY OR OTHER OFFICER AUTHORIZED TO TAKE ACKNOWLEDGEMENTS OR WITNESSED BEFORE TWO PERSONS REGISTERED AND QUALIFIED TO VOTE IN THE ELECTION DISTRICT IN WHICH THE CANDIDATE OFFERS FOR OFFICE.

To be completed by witnesses **OR** notary

State of \_\_\_\_\_ County/City of \_\_\_\_\_

The foregoing instrument was subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, by \_\_\_\_\_.  
PRINT NAME OF CANDIDATE

**WITNESSED:**

1. \_\_\_\_\_  
SIGNATURE OF QUALIFIED VOTER

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
RESIDENT ADDRESS

\_\_\_\_\_  
CITY/TOWN ZIP

2. \_\_\_\_\_  
SIGNATURE OF QUALIFIED VOTER

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
RESIDENT ADDRESS

\_\_\_\_\_  
CITY/TOWN ZIP

**OR**

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

\_\_\_\_\_  
SIGNATURE OF NOTARY OR OTHER OFFICER NOTARY REGISTRATION NUMBER DATE NOTARY COMMISSION EXPIRES

**THIS DECLARATION OF CANDIDACY MUST BE FILED WITH PETITIONS CONTAINING THE REQUIRED NUMBER OF SIGNATURES OF REGISTERED VOTERS. TO OBTAIN ALL REQUIRED FORMS AND CANDIDATE INFORMATION BULLETIN WHICH DETAILS QUALIFICATIONS, NUMBER OF SIGNATURES REQUIRED, WHERE TO FILE AND FILING DEADLINES, CALL THE DEPARTMENT OF ELECTIONS AT: 804-864-8901 OR OUTSIDE THE RICHMOND CALLING AREA, TOLL-FREE 800-552-9745.**