NOMINATION BY PETITION

CANDIDATE FILING FORM

I, _____, residing at
Please print name as it is to appear on the ballot

_____, am filing a petition
Address

to run in the City of Harrington Election on May 5, 2020 for District _____.

I am aware that I must obtain a background check from the Delaware State Bureau of Identification. The City of Harrington will reimburse me for the cost of this background check, if the background check comes back as acceptable for the purposes of filling for a seat on the Harrington City Council.

I am aware that I must fill out a campaign finance form(s) in order to run in the Election and these form(s) must be filed with the Office of the State Election Commissioner within seven (7) days of filing my petition (this form).

_____ _____

Telephone Number (optional) Signature of Candidate

Form must be notarized if it is not completed in the office. Candidate Filing Forms are considered public information under the Freedom of Information Act.

For Office Use Only:	Notary Information
	Sworn to and subscribed before me on the following date:
_____ Received by	_____ Notary Public Signature
_____ Date Received	_____ Date