State of Iowa
Affidavit of Candidacy

Candidate's Name (exactly as it should appear on the ballot – no titles, parentheses, or quotation marks)**:**

_____

Candidate's Name Sounds Like (phonetic spelling)**:** _____

Office Sought: _____ **District or Ward** (if any)**:** _____

Vacancy – Is the candidate running to fill a vacancy due to the death, resignation, removal, or temporary appointment of an office holder? ☐ No ☐ Yes

Type and Date of Election:

☐ Primary on ____/____/____ ☐ General on ____/____/____

☐ City/School on ____/____/____ ☐ Special on ____/____/____

Candidate's Affiliation (only complete for partisan offices or Ch. 44 city nominations)**:**

☐ Democratic ☐ Libertarian ☐ Republican

☐ Not affiliated with any organization

☐ Name of Non-Party Political Organization: _____

No more than 5 words and exactly as it should appear on the ballot.

Candidate's Home Address:

_____

Street (no P.O. boxes) City State Zip County

Candidate's Mailing Address (if different than above)**:**

_____

Street City State Zip County

Candidate's Phone: _____ **Email:** _____

Candidate's Affirmation

I swear (or affirm) that the information provided on this form is correct. I will be qualified to hold this office and if I am elected, I will qualify by taking the oath of office. I know that I cannot hold 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 I (or my committee) receive contributions, make expenditures, or incur indebtedness in excess of $1,000 in a calendar year for the purpose of supporting my candidacy for public office. (This does not apply to candidates for federal office.)

I know that I cannot be a candidate for more than one office to be filled at this election, except as otherwise provided by law.

Candidate's Signature: _____

Must be signed in the presence of a notary.

State of: ____ County of: _____

(Stamp)

Signed and sworn (or affirmed) before me on date of: _____

By: _____
Print Candidate's Name

Notary Signature: _____, Notary Public or authorized notary under §9B.10