



WRITE-IN CANDIDATE STATEMENT OF INTENTION OF CANDIDACY



FULL LEGAL NAME AS REGISTERED					
RESIDENCE ADDRESS		CITY		ZIP	
MAILING ADDRESS		CITY		ZIP	
TELEPHONE NUMBERS	(home)	(cell)	(work)		

EMAIL ADDRESS					
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VOTER REGISTRATION NUMBER:					
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CITY OF RESIDENCE				
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I hereby declare my intention to seek the office listed below in the election listed below as a write-in candidate.

OFFICE SOUGHT		ELECTION DATE	
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I fully understand that I am filing as write-in candidate. I understand that my name will **NOT** appear anywhere on the ballot. Voters who wish to vote for me must use the "write-in" option on their ballot and write/type my name in for the office in which I am seeking. My signature below attests that I understand this.

I have never been convicted of, pled guilty or nolo contendere to a felony or an offense against the S.C. election laws. If so, I have been pardoned under state or federal law or it has been 15 years or more after the completed service of the sentence, including probation and parole time. My signature below attests this.

I hereby affirm that I meet, or will meet by the time of the general or special election, or as otherwise required by law, the qualifications to hold this office.

SIGNATURE _____

THIS SECTION BELOW TO BE COMPLETED BY RECEIVING AUTHORITY	
DATE RECEIVED _____	TIME RECEIVED _____
RECEIVED BY _____	_____
Signature	Title