

## Statement of Intention of Candidacy & Party Pledge

This form must be filed with the appropriate election office by any candidate seeking a political party's nomination. All information on this form will be made available to the public at the time of filing. For more information, visit [www.scVOTES.org/candidate-information](http://www.scVOTES.org/candidate-information).

|   |                             |                            |                       |  |            |
|---|-----------------------------|----------------------------|-----------------------|--|------------|
| Name  | Allan Quinn                 |                            |                       | Party  | Republican |
| Office  | SC House of Representatives |                            |                       | District   | 5          |
| Voter Reg. #  | 391319552                   | Primary or Convention Date | 06/12/2018            | Election Date  | 11/06/2018 |
| <i>Name on ballot may be any combination of a candidate's given name, derivative of the given name, or nickname. A derivative name or nickname must be used in good faith for honest purposes and may not imply professional or social status, an office, or military rank. A nickname may not exceed 15 letters.</i>   |                             |                            |                       |  |            |
| Name on Ballot  | Allan Quinn                 |                            |                       |  |            |
| Name pronunciation, if necessary, for audio ballot (e.g., Jackson Gervais: jur-VAY)   |                             |                            |                       |  |            |
| Candidate Contact Information (address not required to be residence address)  |                             |                            |                       |  |            |
| Address   | 261 Satterfield Rd          | City                       | Easley                | Zip  | 29642      |
| Phone   | 864-918-7633                | Email                      | easybend@aol.com      |  |            |
| <b>Candidate's Oath &amp; Pledge</b><br>I hereby file my notice as a candidate for the nomination as <u>SC House of Representatives 5</u><br>in the primary election or convention to be held on <u>06/12/2018</u> (Primary Date). I affiliate with the <u>Republican</u> Party, and I hereby pledge myself to abide by the results of the primary or convention. I shall not authorize my name to be placed on the general election ballot by petition and will not offer or campaign as a write-in candidate for this office or any other office for which the party has a nominee. I authorize the issuance of an injunction upon ex parte application by the party chairman, as provided by law, should I violate this pledge by offering or campaigning in the ensuing general election for election to this office or any other office for which a nominee has been elected in the party primary election, unless the nominee for the office has become deceased or otherwise disqualified for election in the ensuing general election. 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 for this office. |                             |                            |                       |  |            |
| Candidate Signature <u>Allan Quinn</u> Date <u>3-21-2018</u><br><i>Candidate must sign in the presence of an Election Official or Notary Public.</i>  |                             |                            |                       |  |            |
| Election Official Signature   |                             | <u>Randy Russell</u>       |                       |  |            |
| Date Received   | <u>3/21</u>                 | Time Received              | <u>3:05 pm</u>        | <input type="checkbox"/> SEC <input checked="" type="checkbox"/> <u>Pickens</u> County Board |            |
| For use if candidate signs in presence of Notary Public   |                             |                            |                       |  |            |
| Name of Notary Public   |                             |                            | My Commission Expires |  |            |
| Signature of Notary Public  |                             |                            | Date                  |  |            |