# 2017 Candidate Filing Guidelines

#### **May 16, 2017 Election**

#### **Districts scheduled to hold Candidate Elections:**

Auditorium Recreational Water and Sewer

Highway School

Hospital Water and Sewer Library Weather Modification

## Filing Deadline:

Declarations and Petitions of Candidacy must be submitted to the Clerk or Secretary of the District no later than 5 pm on the 9<sup>th</sup> Friday before the Election (March 17, 2017).

Declarations of Intent for Write-In candidates must be submitted to the Clerk or Secretary of the District no later than 5 pm on the 45<sup>th</sup> day before the Election (April 1, 2017).

#### Withdrawal Deadline:

Candidates may submit a Notarized Statement of Withdrawal to the Clerk or Secretary of the District no later than 5 pm on the 45<sup>th</sup> day before the Election (April 1, 2017).

## November 7, 2017 Election

#### Districts scheduled to hold Candidate Elections:

Cemetery Fire Protection
Cities Recreation

# Filing Deadline:

Declarations and Petitions of Candidacy must be submitted to the Clerk or Secretary of the District no later than 5 pm on the 9<sup>th</sup> Friday before the Election (September 8, 2017).

Declarations of Intent for Write-In candidates must be submitted to the Clerk or Secretary of the District no later than 5 pm on the 45<sup>th</sup> day before the Election (September 23, 2017).

#### Withdrawal Deadline:

Candidates may submit a Notarized Statement of Withdrawal to the Clerk or Secretary of the District no later than 5 pm on the 45<sup>th</sup> day before the Election (September 23, 2017).

# **Required Forms for Filing for May or November Elections:**

## Declaration of Candidacy – Form EC-1A

- 1. Print name exactly as you wish it to appear on the ballot.
  - a. Enter the District Name, Office Title, Term of Office, Election and Date of Election, and Candidate Residence Address.
- 2. Signature of Candidate must be notarized.

#### Petition of Candidacy – Form EC-1B

- 1. Print name of Candidate.
  - a. Enter the Office Title, Filing Deadline, District or Zone Name or Designation, Candidate Name and Office Title, and Date of Election.
- 2. Circulator must collect signatures of at least 5 eligible voters within the Candidate's Zone or District.
- 3. Signature of Circulator must be notarized.

# DECLARATION of CANDIDACY

For						
For(Please <b>print name</b> exactly as	s you wish it to appear on the ballot.)					
Seat or Position (if applicable)						
I, the undersigned, being a resident of						
State of Idaho, do hereby declare myself to be a cand	idate for the office of					
for a term of years, to be voted for at the	Election to be held on the					
day of, and that m	y residence address is					
I further certify that I possess the legal qualifi	cations to hold said office.					
Date:,	Signed					
Subscribed and sworn to before me this day						
(Notary Seal)	Signed					
,	Notary Public					
	Residing at					
	Commission Expires					
INSTR	UCTIONS					
	ust be accompanied by the Petition of Candidacy signed by ne. It must also be submitted to the Clerk of the District no					
CLERK OF THE DISTRICT: Upon receipt of	of this Declaration of Candidacy:					
1. Verify that the Petition of Candidacy is si						
•	ied by the County Clerk prior to submission to your office e to verify that the 5 electors are properly registered					
<ul> <li>a. If the electors are required to be re in the correct zone.</li> </ul>	sidents of the candidate's zone, verify that the electors are					
3. Stamp or write the date and time of receip						
Clerk for ballot preparation.	it a copy of this Declaration of Candidacy to the County					
I,, certify	that the qualifications of the candidate have been verified,					
including the validity of the electors signing the Petit requirements to run for the office indicated on the De						
Signature of the Clerk of the District	Data					
Signature of the Cierk of the District	Date					

**COUNTY CLERK:** Upon receipt of this Declaration of Candidacy, stamp the date and time of receipt on the front of this document. This document is to be used for ballot preparation.

# **PETITION of CANDIDACY**

For		
(Pl	lease <b>print name</b> of candidate.)	
FOR THE OFFICE OF	Seat/Position	for
the	District. This petition must b	e filed in the
office of the appropriate political sub-divisi	ion filing office on or before 5 p.m. on the last day of t	filing for the
Election. The submitte	ed petition must have affixed thereto the names of at le	ast five (5)
qualified electors which reside within the a	ppropriate district or zone.	
I, the undersigned, being a qualified	l elector of the	zone/district,
in the State of Idaho, do hereby certify and	declare that I reside at the place set opposite my name	, and that I
join in the petition of	, a candidate for the	ne office of
	, to be voted for at the election to be held on the	
	<del></del>	·
Signature of Petitioner Printed Nan	me Residence Address D	ate Signed
2		
3		
4		
5		
6		
7		
8		
9		
10		
STATE OF IDAHO		
ss. County of		
•	, being first duly sworn, say: That I am a resident of	of the State of
Idaho and at least eighteen (18) years of ag	e; that every person who signed this sheet of the forego	oing petition
	nce; I believe that each has stated his or her name and a resident of the State of Idaho, and a resident of the	
		-
	Signed	
	Mailing Address	
	, day of	
(Notary Seal)	Signed Notary Public Residing at	
EC-1B, Approved Secretary of State, July 2014		

#### C-1

Rev. 12/15

# APPOINTMENT AND CERTIFICATION OF POLITICAL TREASURER FOR CANDIDATES AND COMMITTEES

(Please print or type)

Pursuant to Section 67-6603(c1), Idaho Code. No contribution shall be received or expenditure made by or on behalf of a candidate or political committee until the candidate or political committee appoints a political treasurer and certifies the name and address of the treasurer to the County Clerk.

Ce	rtification is for: (checl	k appropriate box)				
	CANDIDATE:	Name of Political Candidate				
		Home Phone	Work Phone		Cell Phone	
			WORK I HORE			
		Office Sought		District #	Party	
		Candidate Mailing A	lddress			
		Candidate E-mail Ad	ldress		_	
	COMMITTEE:					
	☐ Party	Name of Committee			_	
	☐ Miscellaneous	Name of Committee	Chairman		Party Affiliation (if any)	
		Home Phone	Work Phone		Cell Phone	
	☐ Measure	Committee Mailing A	Address			
	☐ Candidate/Measure	Chairman E-mail ad	dress		_	
			CERTIFICATION AND	ADDOINTME	N/T	
			CERTIFICATION AND	AFFOINTME	N1	
I,_			y certify and appoint the fo	llowing individu	al who is a registered elector of the	
	ame of Candidate or Commi te of Idaho as the polit		he above named candidate of	or committee:		
	Name of Politic	cal Treasurer				
Home Phone			Work Phone		Cell Phone	
Treasurer Mailing Address						
	Treasurer E-m	ail Address				
				Signature of G	Candidate of Committee Chairman	
Re	turn This Form to:		Ι,	, hereby acc	cept the appointment as the political treasure	
	ry Lou Hansen		Name of Political Treas for the above named o	<i>irer</i> andidate or com	mittee:	
	ton County	#200	Tor the above named (	undraute of com		
	0 Courthouse Dr. iggs, ID 83422	#208				
	18)354-8780			Signature	of Political Treasurer	
	x (208)354-8780					
	ections@co.teton.	.id.us				