

STATE OF IOWA
**Affidavit of Candidacy
Special City Election**

This Affidavit of Candidacy must be filed with your nomination petition.

For the Office of _____ District/Ward # _____
(If applicable)

Check if election is to fill a vacancy.
[This means the office is on the ballot **before** the end of the regular term; because of a death or resignation.]

Name _____
(EXACTLY as you want it to appear on the ballot. Do not include titles, parentheses or quotation marks.)

Name Pronunciation (*sounds like*) _____
(This information is helpful during the recording of the audio ballots. Audio ballots are available for people with disabilities.)

Home Address _____
Street Address City State ZIP

County _____ **Date of Election** _____

***E-mail** _____ ***Phone** () _____

***NOTE:** This information is optional and WILL be published if it is provided.

I swear or affirm that the information I have provided above is correct. I am a candidate for the office indicated above and request that my name be printed on the official ballot for this election as a candidate of the organization named above. I am eligible to hold the office for which I am a candidate; if I am elected I will qualify by taking the oath of office. I know that I cannot hold a 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 my committee or I receive contributions, make expenditures, or incur indebtedness in excess of seven hundred fifty dollars (\$750) in a calendar year for the purpose of supporting my candidacy for public office.

I know that I cannot be a candidate for more than one office to be filled at this election. If I have filed nomination papers for more than one office I must file with the officer who accepted my nomination papers an affidavit indicating for which office I choose to be a candidate. I understand that if the affidavit is not filed by the last day candidates can file nomination papers, I cannot be a candidate for any office on the ballot at this election.

Candidate's Signature: _____
Candidate must sign this affidavit in the presence of a Notary Public

State of _____	County of _____
Signed and sworn to (or affirmed) before me on _____	
Date	
by _____	
Print Candidate's Name	
_____ Signature of Notary Public	

Notary
Stamp/Seal

STATE OF IOWA
Nomination Petition
City Office

To sign this petition you must:

Be a resident of Iowa and the city of _____ and District/Ward _____ (If applicable),
 Be qualified to register to vote in Iowa; but you don't have to be registered.

We, the undersigned eligible electors of the State of Iowa and the above city (and district or ward, if applicable) hereby make the following nomination for the Special City Election, to be held (date of election) _____.

For _____ District/Ward _____ (if applicable).

Check this box if the office is **To Fill a Vacancy***

We nominate (**Candidate's name**) _____ who is a
 resident of the city of _____, District/Ward _____ (if applicable).

Sign your name	Address where you live in Iowa		Today's Date
	House number and street	City	
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			

An affidavit of Candidacy must be filed with this petition. Last revised 2/13/07

***To Fill A Vacancy** means the office is on the ballot because the elected official left before the end of the regular term.