

# DECLARATION OF CANDIDACY

(for nonpartisan Board of Education and Municipal Officer candidates)

Notice: All Information provided on this form will be made publicly available.

PLEASE TYPE OR PRINT

\_\_\_\_\_  
Name of Candidate as It Will Appear on Ballot

\_\_\_\_\_  
Full Legal Name of Candidate

\_\_\_\_\_  
Title of Office Sought (including district, office or ward number if applicable)

\_\_\_\_\_  
Candidate's Address of Residence — Street, City

\_\_\_\_\_  
Candidate's Mailing Address — Street or Box, City, State, ZIP

\_\_\_\_\_  
Telephone Number (Optional)

\_\_\_\_\_  
Email Address (Optional)

\_\_\_\_\_  
Website Address (Optional)

I am a registered voter in \_\_\_\_\_

\_\_\_\_\_  
Precinct

\_\_\_\_\_  
County

Date of Birth \_\_\_\_\_

\_\_\_\_\_  
Month, Day, Year

**Criminal History Disclosure:**

Have you been determined by a court of proper authority in the State of Oklahoma or in another state to be guilty of a misdemeanor involving embezzlement or of a felony, or at this time is there an outstanding warrant for your arrest for a misdemeanor involving embezzlement or for a felony in the State of Oklahoma or in another state? If you check yes below, you must complete the Criminal History Disclosure Supplement form.

Yes

No

I, the undersigned, do hereby solemnly swear or affirm that the abovementioned facts are true and correct, that I have read the qualifications for the office that I seek, that I am fully qualified to become a candidate for said office, and that I will be fully qualified to hold said office, if elected.

\_\_\_\_\_  
Signature of Candidate

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to before me \_\_\_\_\_

\_\_\_\_\_  
Date

My commission expires \_\_\_\_\_

\_\_\_\_\_  
Date

Commission number \_\_\_\_\_

SEAL

\_\_\_\_\_  
Signature of Notary Public or Officer Authorized to Administer Oath

\_\_\_\_\_  
Title of Officer (Notary Public or Other Officer)

Name of candidate: \_\_\_\_\_

Title of office sought: \_\_\_\_\_

## **Criminal History Disclosure Supplement to Declaration of Candidacy**

If you have been determined by a court of proper authority in the State of Oklahoma or in another state to be guilty of a misdemeanor involving embezzlement or of a felony, or at this time there is an outstanding warrant for your arrest for a misdemeanor involving embezzlement or for a felony in the State of Oklahoma or in another state, you must complete the Criminal History Disclosure Supplement form.

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Name of offense

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Date of conviction or issuance of outstanding warrant

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Time prescribed in judgment and sentence

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County and State of conviction or issuance of the outstanding warrant

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Name of offense

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Date of conviction or issuance of outstanding warrant

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Time prescribed in judgment and sentence

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County and State of conviction or issuance of the outstanding warrant

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Name of offense

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Date of conviction or issuance of outstanding warrant

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Time prescribed in judgment and sentence

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County and State of conviction or issuance of the outstanding warrant

If more space is needed, use more than one copy of this form.

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