| STATE OF WEST VIRGINIA<br>Candidate's Certificate of Announcement for 2020 Elections<br>(W. Va. Code §3-5-7)   |
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| THIS FORM MUST BE COMPLETE IN ORDER TO BE ACCEPTED. READ INSTRUCTIONS CAREFULLY.   |
| (1) Date of Election:  |
| Primary - May 12, 2020   |
| (2) Name of Office Sought: <u>County</u> Surveyor  |
| (3) District/Division:   |
| (4) Candidate's Legal Name: Charles Fi Hughes JR<br>(First, middle and last name)  |
| (5) Candidate's Name to Appear on Ballot: Chn. les F. Hughes JR  |
| (Limited to 25 characters)   |
| (6) I am a Resident and Legally Qualified Voter of the County of:  |
| (6)(a) Magisterial District (County Commission and Board of Education candidates):   |
| (7) Current Legal Residence Address at the Time of Filing: <u>2214</u> Slate Cree Kerne  |
| (Do not enter a P.O. Box) Elizabeth WV 26143   |
| (8) Mailing Address: P.O. Box 216  |
| (If different from residence address above)  |
| (If different from residence address above)<br><u>304-489-9640</u><br>Daytime Phone (for public use)<br><u>Mineral Wells WU 26180</u><br><u>hughes survey 1 al frontier.com</u><br>Email Address (for public use)  |
| <u>304-429-9640</u><br>Daytime Phone (for public use) <u>hva hes survey 1</u> a frontier, com<br>Email Address (for public use)  |
| 304-429-9640   |
| Campaign Phone (for public use) Campaign Website   |
| Campaign Committee Name (if applicable)  |
| (9) For Partisan Elections only:<br>I am a Member of and Affiliated with the Following Political Party: Republic Raw. By filling out this<br>space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's<br>registration, and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to<br>W. Va. Code §3-5-7(d)(6). |
| I swear and affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office and that the information provided on this form is true.   |
| (hal 7. Night) 1-15-2020   |
| Candidate's Signature (Must be notarized) Date   |
| (Notary Public Use Only)   |
| State of, County of NOTARY PUBLIC  |
| Subscribed and sworn to before me this _/<br>day of  |
| day of <u>ANULAUY</u> , 20 <u>20</u> .<br>H 1 0 00 0 10 10 11, 20102-1474<br>My Commission Expires Sept. 13, 2022  |
| Signature of Notary Public or official authorized to give oaths Official Form C-1 Revised 5/19   |