THIS FORM MUST BE COMPLETE IN ORDER TO BE ACCEPTED. READ INSTRUCTIONS CAREFULLY.

## STATE OF WEST VIRGINIA

## Municipal Candidate's Certificate of Announcement

| hereby swear and affirm that the following information  | on is true:  |
|---|--|
| 1) Election Type: (Check one)   |  |
|   | al Unexpired Term  |
| (2) Name of Office Sought: City Council   | Ward: N/A  |
| (3) Candidate's Legal Name: James L. Miracle (First, middle and last name)  |  |
| (4) Candidates name used in seeking office: Jim Mirac (Limited to 25 characters)  | cle  |
| (5) I am a resident and legally qualified voter of the m  | nunicipality of: Vienna WV   |
| (5)(a) Ward: (if applicable)  |  |
| (6) Current residence address: (Specific address where candidate resides at time of filling):   | 303 36th Street  |
|   | Vienna, WV 26105   |
| (7) Mailing address: (If different from residence address above):   | Same   |
| (8) For Partisan Elections only:  I am affiliated with the following political party:  By filling out this space. I hereby certify and attest that I am a m   | nember of and affiliated with this political party as evidenced by my  |
| I am affiliated with the following political party:  By filling out this space, I hereby certify and attest that I am a m   | nember of and affiliated with this political party as evidenced by my member of another political party within sixty (60) days of this date,                   |
| I am affiliated with the following political party:  By filling out this space, I hereby certify and attest that I am a mourrent voter's registration and I have not been registered as a pursuant to W. Va. Code §3-5-7(d)(6).   |  |
| I am affiliated with the following political party:  By filling out this space, I hereby certify and attest that I am a m current voter's registration and I have not been registered as a pursuant to W. Va. Code §3-5-7(d)(6).  304-488-2307  | member of another political party within sixty (60) days of this date, turtlemiracle57@gmail.com   |
| I am affiliated with the following political party:  By filling out this space, I hereby certify and attest that I am a mourrent voter's registration and I have not been registered as a pursuant to W. Va. Code §3-5-7(d)(6).  304-488-2307  Daytime Phone (for public use)  Campaign Committee Name (if applicable)  | turtlemiracle57@gmail.com  Email Address (for public use)  |
| I am affiliated with the following political party:  By filling out this space, I hereby certify and attest that I am a mourrent voter's registration and I have not been registered as a pursuant to W. Va. Code §3-5-7(d)(6).  304-488-2307  Daytime Phone (for public use)  Campaign Committee Name (if applicable)  I swear or affirm that I am a candidate for this office in grand that the information provided on this form is true.  Candidate's Signature (must be notatized) | turtlemiracle57@gmail.com  Email Address (for public use)  Campaign Website (if applicable)  good faith, that I am eligible and qualified to hold this office, |