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

STATE OF WEST VIRGINIA

Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is	true:
(1) Election Type: (Check one)	
Primary & General	Unexpired Term
(2) Name of Office Sought: Recorder-Vienna City Council	Ward:
(3) Candidate's Legal Name: (First, middle and last name) Alice Goodwin	
(4) Candidates name used in seeking office: Alice Goodwin (Limited to 25 characters)	
(5) I am a resident and legally qualified voter of the municip	pality of: Vienna WV-Wood County
(5)(a) Ward: (if applicable)	
(6) Current residence address: (Specific address where candidate resides at time of filing):	710 28th Street
	Vienna, WV 26105
(7) Mailing address: (If different from residence address above):	same as above
(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 member current voter's registration and I have not been registered as a member pursuant to W. Va. Code §3-5-7(d)(6). 681-417-8533 Daytime Phone (for public use)	of and affiliated with this political party as evidenced by my of another political party within sixty (60) days of this date, ice.good1@gmail.com
Edyanie i none (foi public use)	Email Address (for public use)
Campaign Committee Name (if applicable)	Campaign Website (if applicable)
I swear or affirm that I am a candidate for this office in good faith and that the information provided on this form is true. Candidate's Signature (must be notarized)	n, that I am eligible and qualified to hold this office,
	Date
(Notary Public Use Or	