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	☐Unexpired Term
(2) Name of Office Sought: Office of the Mayor (Vienna, WV	
Chalf	Waiti.
(3) Candidate's Legal Name: Chad Eugene Emrick (First, middle and last name)	
(4) Candidates name used in seeking office: Chad Emrick (Limited to 25 characters)	
(5) I am a resident and legally qualified voter of the mun	icipality of: Vienna, WV
(5)(a) Ward: (if applicable)	
(6) Command and desired to	
(6) Current residence address: (Specific address where candidate resides at time of filling):	303 39th St
	Vienna, WV 26105
(7) Mailing address:	
(If different from residence address 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 mem	hand and still a law was
out out a registration and I have not been registered as a men	nber of another political party within sixty (60) days of this date,
pursuant to W. Va. Code §3-5-7(d)(6). 301.385.2699	
Daytime Phone (for public use)	info@chademrick.com
Committee to elect Chad Emrick	Email Address (for public use)
Campaign Committee Name (if applicable)	Compoint Website (if and bubble
( application)	
I swear or affirm that I am a candidate for this office in good and that the information provided on this form is true.	faith, that I am eligible and qualified to hold this office,
and that the innormation provided on this form is true.	i i
( Kanilli	2 TAMOU
Candidate's Signature (must be notarized)	Date
(Notary Public U	se Only)
State of WEST IRAINIU County of Wood	
Subaciliad and supplied Seal Official Seal	
STATE OF WEST VIRGINIA	
July 33rd Street	
My Commission Expires June 14, 2024	
Signature of Notary Public or official authorized to give oaths.	