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	Ol Incypied Taxas
(2) Name of Office Sought:	Ward:
(3) Candidate's Legal Name: //ary Congel	Destaler
(4) Candidates name used in seeking office: ///ar	
(5) I am a resident and legally qualified voter of the mui	nicipality of: Vizage
(5)(a) Ward: (if applicable)	
(6) Current residence address: (Specific address where candidate resides at time of filing):	149 Bella Vista Dr. Vienna, WV ZG105
	Viena WV ZG105
(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 current voter's registration and I have not been registered as a mer pursuant to W. Va. Code §3-5-7(d)(6).	mber of another political party within sixty (60) days of this date,
304 - PULICASE TORB 295-6977  Daytime Phone (for public use)	hadeiteler a horld in
Daytime Phone (for public use)	Email Address (for public use)
rune	2424
Campaign Committee Name (if applicable)	Campaign Website (if applicable)
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,
- Van Duft	1-26-24
Candidate's Signature (must be notarized)	Date
ate of Notary Public U	se Only)
pscribed and sworn to before me this <u>all the</u> day of <u>annually</u> , 20 <u>all</u> .	OFFICIAL SEAL NOTARY PUBLIC
gnature of Notary Public or official authorized to give oaths.	STATE OF WEST VIRGINIA TERESA SMITH 308 53rd Street Vienna, WV 26105 My Commission Expires June 14, 2024