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 ☐ Ur	nexpired Term
(2)	Name of Office Sought: Vienne (1) (240)	Ward:
(3)	Candidate's Legal Name: HENRY SASYN (First, middle and last name)	
(4)	Candidates name used in seeking office:	• 1
(5)	I am a resident and legally qualified voter of the municipality of:	Viena
	(5)(a) Ward: (if applicable)	
(6)	Current residence address: (Specific address where candidate resides at time of filing):	1307 Greenmontfully Arme Vacage WV 26161
		Nord MA JOHN
(7)	Mailing address: (If different from residence address above);	
(8)	For Partisan Elections only:	
(0)	I am affiliated with the following political party:	KP.
By filling out this 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 registration and I have not been registered as a member of another political party within sixty (60) days of this date,		
ı	pursuant to W. Va. Code §3-5-7(d)(6).	
		. Sey, enomentile on
	Daytime Phone (for public use) Email Addr	ess (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, that I am eligible and qualified to hold this office, and that the information provided on this form is true.		
	(2)//	M a
	Candidate's Signature (must be r/otariz/ed)	125/24
	Salionate a agriculta (mast be votalized)	Date
(Notary Public Use Only)		
tate of WV County of WOOD		
ubscribed and sworn to before me this <u>251</u> day of		
	anuary , 2034.	OFFICIAL SEAL
Ā	wohany Broll	NOTARY PUBLIC STATE OF WEST VIRGINIA Stephane Broffman
Signati	ure of Notary Public or official authorized to give oaths.	609 29th St. Vienna, WV 26105 Ally Commission Expires August 69, 2026