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

STATE OF WEST VIRGINIA

Municipal Candidate's Certificate of Announcement

(1)	ereby swear and affirm that the following information is to	rue:
. /	Election Type: (Check one)	
	☑ Primary ☐ General	☐Unexpired Term
(2)	Name of Office Sought:Mayor	Ward:
(3)	Candidate's Legal Name: Paul L Jord (First, middle and last name)	an III
(4)	Candidates name used in seeking office: (Limited to 25 characters)	d Jordan
(5)	I am a resident and legally qualified voter of the municip	pality of: Williamstewn
	(5)(a) Ward: (if applicable)	
(6)	Current residence address: (Specific address where candidate resides at time of filing):	23 Painters Crossing
		Williamstown, WY 24187
(7)	Mailing address: (If different from residence address above):	Same
	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). Daytime Phone (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 fair and that the information provided on this form is true. Candidate's Signature (must be notarized)	7/25/2U Date
	and that the information provided on this form is true.	7/25/2V Date