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: City Council	Ward:5
(3) Candidate's Legal Name: William Zachary Huffman (First, middle and last name)	
(4) Candidates name used in seeking office: William (Limited to 25 characters)	
(5) I am a resident and legally qualified voter of the municipali	ty of: Parkers burg
(5)(a) Ward: (if applicable)	5
(6) Current residence address: (Specific address where candidate resides at time of filling):	120 9th St.
	Parkersburg
(7) Mailing address: (If different from residence address above):	PO Box 347
,	Belore OH 45714
(8) For Partisan Elections only: I am affiliated with the following political party:	Independent
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,	
pursuant to W. Va. Code §3-5-7(d)(6). 7:40 - 629 - 8050	zak@whiteoakpr.com
	ail Address (for public use)
Campaign Committee Name (if applicable) Car	npaign 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	
M	7/24/24
Candidate's Signature (mest be noterized)	Date
(Notary Public Use Only)	
State of West Virginia, County of Wood	
Subscribed and sworn to before me this	OFFICIAL SEAL NOTARY PUBLIC
July , 20 24.	STATE OF WEST VIRGINIA Daniel W Huffman
() A Walla	City of Parkersburg One Government Squere Parkersburg WV 28101
Signature of Notary Public or official authorized to give oaths.	My Commission Expires August 31, 2027