



PRECINCT DELEGATE WRITE-IN CANDIDATE DECLARATION OF INTENT

(NAME OF CITY OR TOWNSHIP)

As a write-in candidate for a precinct delegate position, you must file this form with the clerk of your city or township of residence no later than 4:00 p.m. on the first Friday immediately preceding the August primary. As an alternative, you may file this form with your board of election inspectors on the day of the August primary any time prior to the close of the polls.

Name _____
(Print or Type)

Residence Address _____
(Street Address) (Post Office) (Zip Code)

City or Township of _____

I am registered and qualified to vote at this address: Yes No Birth Date _____ / _____ / _____

Home Phone (_____) _____ Business Phone (_____) _____

DATE OF PRIMARY: _____ / _____ / _____

OFFICE SOUGHT: Precinct Delegate.

Precinct No. _____

Political Party _____

By signing this affidavit, I swear the statements made above are true and do hereby declare my intent to seek the precinct delegate position identified above as a write-in candidate.

SIGNATURE OF WRITE-IN CANDIDATE: _____

Subscribed and sworn to by _____ Name of Notary _____

before me on the _____ day of _____, _____ Notary Public, State of Michigan, County of _____

_____ My commission expires _____

_____ Acting in the County of _____

Signature of notary public

OFFICE USE ONLY

OFFICE CODE _____ DATE OF FILING _____ / _____ / _____

RECEIVED BY _____