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	☐Unexpired Term
(2) Name of Office Sought: CITY COUNCIL OF WINFIEDWard: MARNES (3) Candidate's Legal Name: KRIN R: KARNES (First, middle and last name)	
(5) I am a resident and legally qualified voter of the municipality of:	
(5)(a) Ward: (if applicable)	W/A
(6) Current residence address: (Specific address where candidate resides at time of filing):	LOZ WATER SIDE CIR. WINFIELD WU 25213
(7) Mailing address: (If different from residence address above):	102 WATER SPOECIR. WINFIELD WU 25213
(8) For Partisan Elections only:	/ a
I am affiliated with the following political party:	X/ /A
By filling out this space, I hereby certify and attest that I am a memb current voter's registration and I have not been registered as a mem pursuant to W. Va. Code §3-5-7(d)(6).	er of and affiliated with this political party as evidenced by my ber of another political party within sixty (60) days of this date,
<u>304 552 6948</u>	KRKARNES@GMAIL, COM
Daytime Phone (for public use)	Email Address (for public use)
Compains Compains Name (Gazarian)	N/A
Campaign Committee Name (if applicable)	Campaign Website (if applicable)
I swear or affirm that I am a candidate for this office in good fi and that the information provided on this form is true.	aith, that I am eligible and qualified to hold this office,
Candidate's Signature (must be notarized)	(p/23/18) Date
(Notary Public Use	: Only)
State of West Virginia, County of Putnam	
Subscribed and sworn to before me this 28 day of	OFFICIAL SEAL NOTARY PUBLIC
Signature of Notary Public or official authorized to give oaths.	STATE OF WEST VIRGINIA CANDICE BECKETT PUTNAM COUNTY CLERK'S OFFICE 3349 WINFIELD ROAD WINFIELD, WV 25213 My commission expires February 17, 2019