

# 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: Council person      Ward: \_\_\_\_\_

(3) Candidate's Legal Name: VERONICA DALE PARKINS  
(First, middle and last name)

(4) Candidates name used in seeking office: VERONICA DALE PARKINS  
(Limited to 25 characters)

(5) I am a resident and legally qualified voter of the municipality of: Poca W VA  
(5)(a) Ward: (if applicable) \_\_\_\_\_

(6) Current residence address: 683 PINE DR  
(Specific address where candidate resides at time of filing): POCA W VA 25159

(7) Mailing address: \_\_\_\_\_  
(If different from residence address above):

(8) For Partisan Elections only:  
I am affiliated with the following political party: \_\_\_\_\_

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).

Daytime Phone (for public use) \_\_\_\_\_

Email Address (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.

Veronica Dale Parkins  
Candidate's Signature (must be notarized)

6-23-22  
Date

(Notary Public Use Only)

State of West Virginia, County of Putnam

Subscribed and sworn to before me this 23<sup>rd</sup> day of

June, 20 22

Jill N. Burnside  
Signature of Notary Public or official authorized to give oaths.

