

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: RECORDER-ELEANOR Ward: _____

(3) Candidate's Legal Name: LYNDA S. CASTO
(First, middle and last name)

(4) Candidates name used in seeking office: LYNDA S. CASTO
(Limited to 25 characters)

(5) I am a resident and legally qualified voter of the municipality of: ELEANOR, WV
(5)(a) Ward: (if applicable) _____

(6) Current residence address:
(Specific address where candidate resides at time of filing):
P.O. Box 374
101 PARK ROAD

(7) Mailing address:
(If different from residence address above):
P.O. Box 374
ELEANOR, WV 25020

(8) For Partisan Elections only:
I am affiliated with the following political party: N/A

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).

304-206-7150
Daytime Phone (for public use)

CastoLynda@gmail.com
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.

Lynda S. Casto
Candidate's Signature (must be notarized)

6/24/26
Date

(Notary Public Use Only)

State of WV, County of Putnam

Subscribed and sworn to before me this 24th day of

June, 2026

Marcia L. Fewell
Signature of Notary Public or official authorized to give oaths.

