BLAIR COUNTY BOARD OF ELECTIONS CANDIDATE'S AFFIDAVIT

Name:			
Last	First	Middle	Suffix
Residential Address:			
City:	State: _	Zip Code:	
Municipality:			
Mailing Address (if differen	t from residential):		
City:	State:	Zip Code:	
E-mail Address:			
Office Seeking Nomination:	:		
Political Party:			
Name as it is to appear on th	ne ballot:		
of the office for which that I will not knowir election expenses, an provisions of Section reporting of campaign of school board in a contained has not been prethat I am not a candid same year as the office	In I desire to be a candidate and prohibiting corrupt prair 1626 of the Pennsylvania contributions and expendistrict where that office is sented as a candidate by no late for an office which I are subject to this affidavit.		m eligible for said office, limiting nomination and that I am aware of the election and post-election candidate for the office isterial district judge, my party for the same office; is not set to expire in the
Sworn to and subscribed before me this		I swear or affirm to the above parts as required by the law(s) applicable to the office I am seeking.	
day of	, 2025		
Signature of Notary Public		Signature of Candi	date
My commissioner exp	vires:	Phone Number	
		Election District (I	Precinct)