

Declaration of Candidacy

FILING DATES: December 27 and 28, 2018 by 4 p.m.



State of Rhode Island
and Providence Plantations

- Federal and Statewide Offices to be filed with the RI Department of State, Elections Division, 148 W. River St. Providence, RI
- State and Local Offices to be filed with the Local Board of Canvassers

CANDIDATE DECLARATION	ELECTION DATES
The undersigned hereby declares that they are eligible under the provisions of Chapter 17-14 of the General Laws of 1956, as amended, to be a party candidate to be voted for at a Primary, or as an unaffiliated candidate to be voted for at the General Election and make the following declarations:	Primary February 5, 2019 General Election March 5, 2019

CANDIDATE INFORMATION

Name of Candidate As it appears on the voting list (PRINT OR TYPE)

First	MI	Last	Suffix
-------	----	------	--------

Address

Street Address	City or Town	State	Zip
----------------	--------------	-------	-----

Date of Birth

Month	Day	Year	Place of Birth	State
			City or Town	

Length of Residence in Rhode Island

Length of Residence in Rhode Island	Length of Residence in City or Town	Phone Number
-------------------------------------	-------------------------------------	--------------

FILE DECLARATION AS

Declaration for Party Candidate	Declaration for Independent/Unaffiliated Candidate
<input type="checkbox"/> Democrat <input type="checkbox"/> Moderate <input type="checkbox"/> Republican <input type="checkbox"/> Non-Partisan Local Office	<input type="checkbox"/> Independent <input type="checkbox"/> Other: _____ <small>Indicate Organization/Political Principle represented - Cannot be more than 3 words and cannot contain the words "Democrat", "Moderate" or "Republican".</small>

TITLE OF OFFICE (check only one office on this form and enter district number if applicable)

Federal Office	Statewide Office
<input type="checkbox"/> Senator in Congress <input type="checkbox"/> Representative in Congress District _____	<input type="checkbox"/> Governor <input type="checkbox"/> Attorney General <input type="checkbox"/> Lt. Governor <input type="checkbox"/> Secretary of State <input type="checkbox"/> General Treasurer
State Offices	Local Office
<input type="checkbox"/> Senator in General Assembly District _____ <input type="checkbox"/> Senatorial District Committee District _____ <input type="checkbox"/> Representative in General Assembly District _____ <input type="checkbox"/> Representative District Committee District _____ <input type="checkbox"/> Democratic State Committeeman District _____ <input type="checkbox"/> Democratic State Committeewoman District _____	<input type="checkbox"/> _____ Title of local office being sought _____ Ward/District (if applicable) _____

I hereby certify that I am not now imprisoned upon a felony conviction, nor have I been lawfully adjudicated to be non compos mentis (of unsound mind); and (if a party candidate) I have not been a member of a political party other than the declared party within ninety (90) days of filing date.

If a candidate for state or local office, I hereby certify that I have not within the preceding three (3) years served any sentence, incarcerated or suspended, on probation or parole, for a crime committed after November 5, 1986 upon a plea of nolo contendere or guilty or upon a conviction for a felony or for a misdemeanor for which a sentence of imprisonment for six (6) months or more, whether suspended or to be served was imposed.

By signing and filing this Declaration of Candidacy, it is my express intention to withdraw any and all declarations of candidacy that I previously filed for any state or local public office during this current declaration period. I do so with full knowledge that any previously filed Declaration of Candidacy shall become null and void.

WITNESSES:

_____	Signature of Candidate as it appears on voting list
Signature	Residence
_____	_____
Signature	Residence