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:	CEIVEN
(1) Election Type: (Check one)	N 17 2025
☐ Primary	M
(2) Name of Office Sought: Recorder Ward: Harpe	ers ferry
(3) Candidate's Legal Name: Paul D Bullock (First, middle and last name)	
(4) Candidates name used in seeking office: Paul Bullock	
(5) I am a resident and legally qualified voter of the municipality of: Harpers Ferr	
(5)(a) Ward: (if applicable)	•
(6) Current residence address: (Specific address where candidate resides at time of filing): Harpers Ferry	
(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 a current voter's registration and I have not been registered as a member of another political party within sixty (6 pursuant to W. Va. Code §3-5-7(d)(6). 516 353-4071 Daytime Phone (for public use) Email Address (for public use)	0) days of this date,
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 a current voter's registration and I have not been registered as a member of another political party within sixty (6 pursuant to W. Va. Code §3-5-7(d)(6).	0) days of this date,
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 a current voter's registration and I have not been registered as a member of another political party within sixty (6 pursuant to W. Va. Code §3-5-7(d)(6). 516 353-4071 Daytime Phone (for public use) Email Address (for public use)	Com
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 a current voter's registration and I have not been registered as a member of another political party within sixty (6 pursuant to W. Va. Code §3-5-7(d)(6). 516 35 3 - 4071 Daytime Phone (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 lead to the same of the space of the space of the same of th	Com