



PRECINCT COMMITTEEMAN WRITE-IN FILING INFORMATION

Use this form to declare your intent to be a write-in candidate for precinct committeeman in Idaho.

Filing Dates and Deadlines

You must submit your complete declaration by 5:00 pm (local time) on the candidate filing deadline. (*§34-704, Idaho Code*)

Candidate Filing Deadline:
September 6, 2024

All deadlines are at 5:00 pm (local time).

Completing the Declaration of Intent

When completing the Declaration of Intent, be sure to complete all fields and questions. Any incomplete or missing information may void your filing.

Section 1: Office Information

Enter the precinct number in which you are running for precinct committeeman.

Section 2: Political Party

You must be a registered member of the political party you are running for. Check your voter registration at voteidaho.gov.

Section 3: Candidate Information

When entering your Ballot Name, the following will **NOT** be allowed on the ballot:

- Nicknames that promote a particular political platform or are deemed offensive.
- Professional or military identifiers such as Dr., M.D., PhD., Esq., CPA, Captain, General, etc.

A phone number is required and will become publicly available upon request.

Section 4: Residential Address

- This **MUST** be a physical address. P.O. Boxes will not be accepted.
- If your residential address is the same as your mailing address, make sure to check the box at the bottom of the section.

Section 6: Homeowner's Exemption

If you or your spouse have claimed a homeowner's exemption, list the address in this section.

Office Requirements

Precinct Committeeman requirements are listed below.

Requirements for precinct committeeman

- 18 years of age
- United States Citizen
- Registered elector within the precinct for 6 months by the date of the election



WRITE-IN DECLARATION OF INTENT PRECINCT COMMITTEEMAN

Candidate Filing Deadline:
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Office name

1

Precinct Committeeman

Precinct Name/Number: _____

Political party

2

Constitution Party

Democratic Party

Libertarian Party

Republican Party

NOTE: Candidates must be registered with the selected political party.

Candidate information

Enter your name as it appears on your voter registration.

3

First name _____ Middle name _____

Last name _____ Suffix (if applicable) _____

Enter your name as you would like it to appear on the ballot.

Ballot name _____

NOTE: You may not use nicknames that promote a particular political platform or are deemed offensive. Professional or military identifiers (Dr., M.D., PhD., Esq., CPA, Captain, General, etc.) are also not allowed on the ballot.

Enter your phone number.

Phone number _____ Email address _____

NOTE: Your phone number is required and will become publicly available upon request.

Residential address

Must be a street address. P.O. Boxes are not allowed.

4

Address (not P.O. Box) _____ Unit/Apt # _____

City _____ State _____ Zip _____

My mailing address is the same as my residential address. (If you check this box, then skip section 5)

Mailing address

Provide the address where you receive mail.

5

Address or P.O. Box _____ Unit/Apt # _____

City _____ State _____ Zip _____

Homeowner's exemption

If you or your spouse have claimed a homeowner's exemption, provide the address.

6

I or my spouse have claimed a homeowner's exemption. (If no, proceed to section 7)

Address _____ Unit/Apt # _____

City _____ State _____ Zip _____

Signature

7

I, the undersigned, do hereby declare myself a candidate for the office entered above.

I certify that I am registered with the political party selected, that I possess the legal qualifications to hold said office, and that the information on this declaration is true and accurate.

Candidate, sign and date here (Required)

X _____

Date (mm/dd/yyyy) ____ / ____ / ____

Official Use Only

Candidate residency verified.

Homeowner's exemption verified (if applicable).

Party affiliation verified.