



CITY OFFICE CANDIDATE FILING INFORMATION

This information is subject to amendatory change during the 2021 session of the Idaho Legislature. If changes occur, an updated version will be made available.

CANDIDATE FILING PERIOD <i>(I.C. 50-410)</i>	FILING REQUIREMENTS
<p><i>Opens:</i> August 23, 2021 (8:00 am)</p> <p><i>Closes:</i> September 3, 2021 (5:00 pm)</p>	<p>A candidate has two options when filing for placement on the ballot:</p> <ol style="list-style-type: none"> 1. File a Declaration of Candidacy and pay the filing fee. 2. File a Declaration of Candidacy and nominating petitions, containing the required number of signatures of qualified electors verified prior to submission.
<p>CANDIDATE WITHDRAWAL DEADLINES <i>(I.C. 34-1405A)</i></p> <p>September 17, 2021 (5:00 pm)</p>	

ALL CANDIDATES: DECLARATION OF CANDIDACY - FORM EC-3A

When completing the Declaration of Candidacy, be sure to complete all fields and questions. Also, please note:

1. For the question, "How you would like your name to appear on the ballot," please clearly print your name exactly as you wish it to appear on the ballot. *(I.C. 34-903A)*
2. You must be **registered to vote in the city.**
(Contact your County Clerk to verify that you are registered to vote in the city.)
3. The signature of the candidate must be notarized.

Any incomplete or missing information may void your filing.

OPTION 1: FILING FEE *(I.C. 50-406)*

Filing Fee \$40.00

OPTION 2: NOMINATING PETITIONS - FORM EC-3B *(this form may be reproduced)*

Candidates for City Offices require: 5 signatures of eligible voters within the city *(I.C. 50-406)*

All petitions must be complete.

1. The top portion of each petition sheet must be filled in prior to circulation.
2. The circulator's signature must be notarized on the bottom portion of each petition page prior to being verified by the County Clerk.

CAMPAIGN FINANCE INFORMATION

All candidates for City Office should contact the County Clerk's Office for information on reporting requirements prior to announcing candidacy, accepting donations or spending money.

Should you have additional questions, please do not hesitate to contact the County Clerk's Office.

QUESTIONS

Contact the County Clerk's Office:

Email: jfuqua@co.gooding.id.us
Phone: (208) 934-5479
Fax: (208) 934-5085

Personal Delivery:
 624 Main St
 Gooding, ID 83330

Mailing Address:
 624 Main St
 Gooding, ID 83330



CITY OFFICE COMPLETING THE DECLARATION OF CANDIDACY

SECTION 1: OFFICE INFORMATION

1. Enter the name of the office that you will be a candidate for to the right of "Filing for the Office of."
2. Enter the name of the City to the right of "City Name."

SECTION 2: CANDIDATE INFORMATION

1. Enter your First Name, Middle Initial, Last Name and Suffix, if applicable, as it appears on your voter registration record.
2. Enter your Residence Address, including the street number, street name, City, State, Zip Code and County, as it appears on your voter registration record. (Note: This must be your physical address. PO Boxes are not allowed as a residence address.)
3. Enter your Mailing Address if it is different than your Residence Address.

SECTION 3: BALLOT NAME

1. Enter your Name as it will appear on the ballot. *(I.C. 34-903A) (Please print clearly.)*
 - a. Nicknames may be included if it is a name that is commonly known. However, nicknames that promote a particular political platform or may be deemed offensive are not allowed.
 - b. Professional identifiers are also not allowed on the ballot (i.e. Dr., M.D., PhD., Esq., CPA, etc.).

SECTION 4: C-1 CAMPAIGN FINANCE INFORMATION

Pursuant to Section 67-6603, Idaho Code, no contribution shall be received or any expenditure made by or on behalf of a candidate until they appoint a political treasurer. A candidate may appoint himself his own political treasurer.

Pursuant to Section 67-6608(1), Idaho Code, a candidate is exempt from filing reports until such a time as the candidate receives contributions or expends funds in the amount of \$500 or more.

*** Any candidate that reaches the \$500 threshold must create a Campaign Finance account through the Secretary of State Campaign Finance Portal.*

SECTION 5: CERTIFICATION

1. Carefully read the certification.
2. Enter the date of the election in the certification.
3. In the presence of a notary, sign and date the Declaration of Candidacy.
 - a. The notary will then complete the bottom portion of the Declaration of Candidacy.

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CITY OFFICE COMPLETING THE PETITION OF CANDIDACY

SECTION 1: OFFICE INFORMATION

1. Enter the name of the office that you will be a candidate for to the right of "Filing for the Office of:"
2. Enter the name of the City to the right of "City Name:"

SECTION 2: CANDIDATE INFORMATION

1. Enter your Name as it will appear on the ballot. *(I.C. 34-903A) (Please print clearly.)*
 - a. Nicknames may be included if it is a name that is commonly known. However, nicknames that promote a particular political platform or may be deemed offensive are not allowed.
 - b. Professional identifiers are also not allowed on the ballot (i.e. Dr., M.D., PhD., Esq., CPA, etc.).

SECTION 3: SIGNERS SECTION

2. Enter the date of the election in the Signers Statement.
3. Collect signatures of qualified electors (i.e. registered voters) of your city, or if required, your subdistrict or zone.
4. Each individual participating in the petition must:
 - a. Sign their name.
 - b. Print their name.
 - c. Print their residence address. *(Note: PO Boxes are not allowed. The listing of a PO Box will automatically invalidate the signature and it will not be counted in the number of required signatures.)*
 - d. Enter the date that they signed the petition.

SECTION 4: CERTIFICATION

1. Enter the County in which the circulator is having the notarization completed to the right of "County of."
2. Enter the name of the circulator along with their county of residence in the Certification Statement.
3. In the presence of a notary, the circulator will sign and enter their address on the Petition of Candidacy.
 - a. The notary will then complete the bottom portion of the Petition of Candidacy.
 - b. Note: The candidate may have other individuals circulate petitions on their behalf. In this case, the individual circulating the petition will complete, sign and have notarized the Certification prior to returning the completed petition to the candidate.

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CITY OFFICE DECLARATION OF CANDIDACY

CANDIDATE FILING PERIOD (I.C. 50-410)		OFFICE INFORMATION	
<i>Opens: August 23, 2021 (8:00 am)</i> <i>Closes: September 3, 2021 (5:00 pm)</i>		Filing for the Office of:	City Council
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)		City Name:	City of Gooding
September 17, 2021 (5:00 pm)			

CANDIDATE INFORMATION				
Candidate Name (As it appears on your voter registration record.)				
First	MI	Last	Suffix	
Residence Address (As it appears on your voter registration record.)				
Street Address	City	State	Zip Code	County
Mailing Address				
Street Address	City	State	Zip Code	County

BALLOT NAME
<i>Write your name exactly as you would like it to appear on the ballot</i>

CAMPAIGN FINANCE INFORMATION
<input checked="" type="checkbox"/> I do hereby certify that I am a registered elector of the State of Idaho and appoint myself as treasurer for my campaign. If any campaign finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Secretary of State, and may at that time, appoint another person as Treasurer or remain as my own Treasurer.

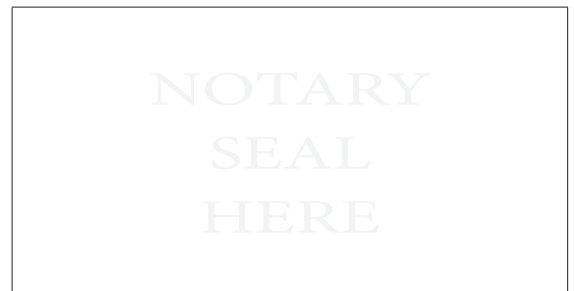
CERTIFICATION	
I, the undersigned, being a resident of the State of Idaho and of the city listed above, do hereby declare myself a candidate for the office entered above to be voted on at the Election to be held on the <u>2nd</u> day of <u>November</u> , 2021 and I certify that the information on this Declaration is true and accurate.	
I further certify that I possess the legal qualifications to hold said office. I submit herewith the filing fee of (\$40.00), or in lieu of the filing fee the nominating petition containing the five (5) signatures of qualified electors as statutorily required.	
Dated: _____	Candidate Signature: _____

Subscribed and sworn to before me this _____ day of _____, _____.

Signature: _____

Notary Public in and for the State of Idaho, residing at

My Commission Expires: _____





CITY OFFICE PETITION FOR CANDIDACY

CANDIDATE FILING PERIOD (I.C. 50-410)	OFFICE INFORMATION	
<p>Opens: August 23, 2021 (8:00 am)</p> <p>Closes: September 3, 2021 (5:00 pm)</p>	Filing for the Office of:	City Council
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)	City Name:	City of Gooding
September 17, 2021 (5:00 pm)		

CANDIDATE INFORMATION
Candidate Name (As it will appear on the ballot.)

This petition must be filed in the office of the appropriate political sub-division filing office with the Declaration of Candidacy on or before 5:00 p.m. on the last day of filing for the Election at which you are desiring to participate in. The submitted petition must have affixed thereto the names of at least five (5) qualified electors which reside within the city.

SIGNERS STATEMENT			
<p>I, the undersigned, being a qualified elector of the city listed above in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name, and that I join in the petition of the candidate for the office listed above, to be voted for at the election to be held on the <u>2nd</u> day of <u>November</u>, 2021, and that each for himself says: I have personally signed this petition; I am a qualified elector of the State of Idaho and my residence address is correctly written after my name.</p>			
Signature of Petitioner	Printed Name	Residence Address	Date Signed
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____

CERTIFICATION	
State of Idaho County of <u>Gooding</u>	
I, _____, being first duly sworn say: That I am a resident of the State of Idaho and at least eighteen (18) years of age: that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence: I believe that each has stated his or her name address and residence correctly, that each signer is a qualified elector of the State of Idaho, and a resident of the county of <u>Gooding</u> .	
Circulator Signature: _____	Address: _____

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Signature: _____

Notary Public in and for the State of Idaho, residing at

My Commission Expires: _____

