

Candidate's Declaration of Intention

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FORM
CD

1 Ballot Information

Name (as it will appear on the ballot, including punctuation)

JAY ARMSTRISTEER

City of Residence (as it will appear on the ballot)

Office Sought

SHERIFF

District No.

N/A

Party Nomination Sought: ☒ Democratic ☐ RepublicanTerm: ☒ Regular ☐ Unexpired

2 Elected Judicial Candidates Only (complete if applicable)

District Court Judge Division No.

District Magistrate Judge Position No.

3 Contact Information **! All information is public record**Select one: ☒ Mr. ☐ Ms. ☐ Mrs. ☐ Dr.

Residence

City

County

Zip

(SAME)

Mailing Address (if different from residential address)

City

State

Zip

Phone (optional)

Cell Phone (optional)

Email (optional)

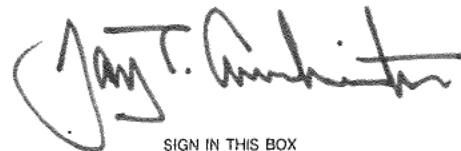
Website (optional)

ARMSTRISTEER@SHERIFF2020@GMAIL

4 Candidate Signature

I declare that I am affiliated with the above-stated party and that I intend to become a candidate for the above-stated office at the appropriate election.

Date 02 / 14 / 2024
Month Day Year



SIGN IN THIS BOX

ATTESTATION (for office use only)

Secretary of State or County Election Officer

Assistant Secretary of State or Deputy County Election Officer

Notary (applicable only for precinct committeeman or committeewoman)

