NOTIFICATION AND DECLARATION OF CANDIDACY

Conservation District	Position Number	
Name (as it would appear on the official ballot)		
Address, City, State, Zip+4		
For the purpose of having my name placed on the official ballot as a candidate for election for the office of Conservation District Director, I do solemnly swear or affirm that I:		
 Reside in said Conservation District, and Am a registered voter within the boundaries of said Conservation District. 		
Signature	Date	
Subscribed and sworn to before me this day of,		
Notary Public		
My Commission Expires		
Please check one of the following:		
I have a Cooperator Agreement with said Conservation District; or		
I am making application for a Cooperator Agreement with District.	h said Conservation	
	1	
I have verified with the County Election Board that the above-mentioned individual is a registered voter within the boundaries of said conservation district.		
	_, District Representative	

A COPY OF THE COOPERATOR AGREEMENT OR APPLICATION FOR CONSERVATION DISTRICT COOPERATOR AGREEMENT MUST BE SUBMITTED WITH THIS FORM

TO BE FILLED OUT BY APPLICANT:

(Please print legibly)

Name:		
Date of Birth:		
Mailing Address (street/city/zip):		
Home Phone:	Cell/Office Phone:	
Primary E-mail Address:		
Conservation District:		
Have you previously served on this or any other Conservation District Board? If yes, list district name and dates served:		
Signature:	Date:	