Form No. 2-W Prescribed by the Ohio Secretary of State (12/2024)

Declaration of Candidacy

Non-Partisan Primary Election

For Member of the Governing Board of an Educational Service Center

To be filed with the Board of Elections of the county in which the educational service center's central administrative offices are located, not later than 4 p.m. of the 90th day before the primary election.

R.C. 3501.38, 3513.254, 3513.255, 3513.256, 3513.06

Declaration of Candidacy

NOTE - The candidate must fill in, sign and date this declaration of candidacy before the signatures of electors are affixed.

I, _____ ,
Name of Candidate (include all prior names used in the past 5 years, excluding marriage name changes)

the undersigned, hereby declare under penalty of election falsification that my voting residence address is

_____ , _____ , Ohio _____ , and I am a qualified elector.
Street Number and Address (or rural route and number, if any) City or Village Zip Code

I further declare that I desire to be a candidate for nomination to the office of Member of the Governing Board of

the _____ Educational Service Center from the _____
Educational Service Center School District

district for the **Check one** ☐ full term or ☐ unexpired term ending _____ at the primary election to be held
Unexpired Term Ending Date

on the _____ day of _____ , _____ .
Day Month Year

I further declare that, if elected to this office or position, I will qualify therefor.

Dated this _____ day of _____ , _____ . _____
Day Month Year **Signature of Candidate**

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

I, _____ , hereby designate the persons named below as a committee to represent me:
Name of Candidate

Name	Residence

Petition for Candidate

We, the undersigned, qualified electors of the State of Ohio, whose voting residence is in the county, city, village, or township set opposite our names, hereby nominate _____ , as a candidate for nomination to the office of Member of the Governing Board of the Educational Service Center as listed above for the **Check one** ☐ full term or ☐ unexpired term ending _____ to be voted for at the next primary election, and certify said person is, in our opinion, well qualified to perform the duties of the office or position to which the person desires to be elected.
Name of Candidate Unexpired Term Ending Date

Signatures on this petition must be from only one county and must be written in ink.

Signature	Voting Residence Street Number and Address	City, Village, or Township	County	Date of Signing
1.				
2.				
3.				

Signature	Voting Residence Street Number and Address	City, Village, or Township	County	Date of Signing
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Circulator Statement

Must be completed and signed by the circulator.

I, _____, declare under penalty of election falsification that I reside at the address
Printed Name of Circulator
appearing below my signature; that I am the circulator of the foregoing petition containing _____ signatures;
Number
that I witnessed the affixing of every signature; that all signers were to the best of my knowledge and belief qualified to sign; and that every signature is to the best of my knowledge and belief the signature of the person whose signature it purports to be or of an attorney in fact acting pursuant to section 3501.382 of the Revised Code.

_____
Signature of Circulator

_____
Permanent Residence Address

_____ _____ _____
City or Village State Zip Code