Form No. 3-C Prescribed by the Ohio Secretary of State (12/2024)

Nominating Petition and Statement of Candidacy

For State Office (Other than Governor/Lieutenant Governor and Supreme Court)

To be filed with the office of the Secretary of State, not later than 4 p.m. of the day before the primary election.

R.C. 3513.257, .261, .262, .28, 3501.38, 3513.271

Statement of Candidacy

NOTE - The candidate must fill in, sign and date this statement 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 _____
Office

for the: **Check one** ☐ full term or ☐ unexpired term ending _____ , at the general election to be held on
Unexpired Term Ending Date

the _____ day of November, _____ .
Day Year

I further declare that I am an elector qualified to vote for the office I seek.

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

Nominating Petition

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
Name of Candidate

candidate for election to the office of _____ for the: **Check one** ☐ full term or
Office

☐ unexpired term ending _____ , to be voted for at the next general 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.
Unexpired Term Ending Date

Signature	Voting Residence Street Number and Address	City, Village, or Township	County	Date of Signing
1.				
2.				
3.				
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6.				

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

To be completed by the circulator, if applicable: Name and address of person or entity employing you to circulate this petition paper.

Print Name of Employer	Street Number and Address (or rural route and number)	City or Village	State	Zip Code