Candidate Information Form
& Receipt For
_______ Election Year

Name of Candidate: ___________________________________________________________

Office Sought: ___________________________ District No. _______ Division No. _______
(If any) (If any)

Subdistrict No. ________, Position No. ________, County in which Candidate resides:_____________________
(If any) (If any)

Party Affiliation: Democratic _______ Republican _______ Libertarian _______
Nonpartisan Judicial / Prosecutor _______ Other _____________________________

Phone: (_____) ___________________ Please put the number you want released to the public.

Permanent Physical Address: Campaign Address (if different from permanent address):

_________________________________________ _______________________________________

_________________________________________ _______________________________________

_________________________________________ _______________________________________

1 a. The Secretary of State has received a party certificate or other document showing Candidate’s payment of filing fees, etc ........ 1a. ______ or
b. Independent Candidate or Nonpartisan Candidate has either paid a filing fee or filed petition signatures ......................... 1b. ______

2. Candidate has completed and signed a Political Practices Pledge .............................................................................................. 2. ______

3. Candidate has been offered the opportunity to complete optional background information ........................................................................ 3. ______

4. Candidate has received an information packet which includes: ........................................................................................................ 4. ______
   1. Arkansas Election Calendar
   2. Information regarding filing of financial disclosure reports

This receipt shall serve as verification that all filing procedures with the Secretary of State’s office have been completed, and subject to petition review if necessary, the above candidate is officially filed for the 20 ________ election ballot.

_________________________________________ _______________________________________
Candidate’s Signature Elections Division Staff

18x783

** The following information is optional **

Marital status: Married ☐ Single ☐ Gender: Male ☐ Female ☐

Place of birth: ___________________________ Date of birth: ________

Number of children: _____ Religion: _______________ Occupation: __________________

Schools attended: _______________________________________________________________

Current office held (if any): __________________________

Previous public office(s) held (if any): __________________________

Email address: __________________________

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