City of
CRESTON, IOWA

116 W. Adams • P.O. Box 449 • Creston, IA 50801-0449
Phone 641-782-2000 • Fax 641-782-6377

Creston's Restored Depot and City Hall

Dear Candidate:

This packet is for Candidates running for City Council positions that are up for election in 2015. The City Election is November 3, 2015. The packet includes a Nomination Petition, an Affidavit of Candidacy Form, Nomination Papers Instructions and Candidate Guide. You may make as many copies as needed.

Important Web Sites

1. Iowa Ethics and Campaign Disclosure Board located at http://www.iowa.gov/ethics/campaigns/committee_info/county/city_candidate.htm which has the disclosure reports that are needed after your campaign contributions exceed $2,000.

2. The Secretary of State's site, located at http://sos.iowa.gov/elections/electioninfo/cityelections.html that has the Candidate Guide, City Election Calendar, Nomination Papers and other information about running for an office.

The number of **LEGIBLE** signatures needed depends on the city population.

100 or less need at least 5 signatures
100 – 3,499 need at least 10 signatures
3,500 or more need at least **25** signatures

The deadline for filing the Nomination Papers with the **Union County Auditor** is September 17, 2015, no later than 5:00 p.m. **Nomination Papers may be turned into the Union County Auditor starting August 24, 2015 but may be picked up anytime at either the Union County Auditors office of the City Clerk's office.**

If you have any questions, please contact our office at 641.782.2000, ext. 3, or the Union County Auditor's office at 641.782.1701.

Sincerely,

Lisa Williamson
City Clerk

State of Iowa
Affidavit of Candidacy

Candidate's Name (exactly as it should appear on the ballot – no titles, parentheses, or quotation marks):

_____

Candidate's Name Sounds Like (phonetic spelling): _____

Office Sought: _____ **District or Ward** (if any): _____

Vacancy – Is the candidate running to fill a vacancy due to the death, resignation, removal, or temporary appointment of an office holder? ☐ Yes ☐ No

Type and Date of Election:

☐ Primary on ___/___/___ ☐ General on ___/___/___ ☑ City on 11 / 03 / 15

☐ School on ___/___/___ ☐ Special on ___/___/___

Candidate's Affiliation (only complete for partisan offices or Ch. 44 city nominations):

☐ Democratic ☐ Republican

☐ Not affiliated with any organization

☐ Name of Non-Party Political Organization: _____

No more than 5 words and exactly as it should appear on the ballot.

Candidate's Home Address:

_____

treet (no P.O. boxes) City State Zip County

Candidate's Mailing Address (if different than above):

_____

Street City State Zip County

Candidate's Phone: _____ **Email:** _____

Candidate's Affirmation

I swear (or affirm) that the information provided on this form is correct. I will be qualified to hold this office and if I am elected, I will qualify by taking the oath of office. I know that I cannot hold public office if I have been convicted of a felony or other infamous crime and my rights have not been restored by the governor or by the president of the United States.

I know that I am required to organize a candidate's committee, which shall file an organization statement and disclosure reports if I (or my committee) receive contributions, make expenditures, or incur indebtedness in excess of $750 in a calendar year for the purpose of supporting my candidacy for public office. (This does not apply to candidates for federal office.)

I know that I cannot be a candidate for more than one office to be filled at this election (except in the case of county agricultural extension council or soil and water conservation district commission).

Candidate's Signature: _____

Must be signed in the presence of a notary.

State of: ____ County of: _____

'igned and sworn (or affirmed) before me on date of: _____ (Stamp)

By: _____

Print Candidate's Name

Notary Signature: _____ Notary Title: _____

State of Iowa
Nomination Petition for Non-Partisan Office

Candidate Information

Name of Candidate: _____ Office Sought: _____

Candidate's County of Residence: UNION Candidate's City of Residence: CRESTON

Type and Date of Election:

☐ General on ___/___/___ ☐ Special on ___/___/___ ☐ School on ___/___/___ ☑ City on 11 / 03 / 15

Is the candidate running to fill a vacancy due to the death, resignation, removal, or temporary appointment of an office holder? ☐ No ☐ Yes

For School Elections Only

School District: _____ School Director District (if any): _____

For City Elections Only

Office Ward (if any): _____

For Other Elections Only

Office District (if any): _____

We, the undersigned eligible electors of the appropriate county, city, school district, school or community college director district, or other district as established by law, and the state of Iowa hereby make the nomination outlined above. If the candidate named above accepts the nomination, we believe the candidate is or will be a resident of the appropriate county, city, school district, school or community college director district, or other district established by law as required by law.

Sign your name	Address where you live in Iowa		Today's Date
	House number and street	City	
1.			
2.			
3.			
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12.			
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15.			

State of Iowa
Nomination Petition for Non-Partisan Office

Candidate Information

Name of Candidate: _____ Office Sought: _____

Candidate's County of Residence: UNION Candidate's City of Residence: CRESTON

Type and Date of Election:

☐ General on ___/___/___ ☐ Special on ___/___/___ ☐ School on ___/___/___ ☑ City on 11 / 03 / 15

Is the candidate running to fill a vacancy due to the death, resignation, removal, or temporary appointment of an office holder? ☐ No ☐ Yes

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School District: _____ School Director District (if any): _____

For City Elections Only

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Sign your name	Address where you live in Iowa		Today's Date
	House number and street	City	
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