

**City of Takoma Park  
Office of the City Clerk  
7500 Maple Avenue, Takoma Park, Maryland 20912**

**CERTIFICATION OF ELIGIBILITY FOR CANDIDACY**

Name of candidate		Name to be placed on the ballot	
Office sought (Mayor/Councilmember)		Ward	
Residence address			
Mailing address (if different)			
Contact phone		Public phone	
Fax			
Email			
Date of birth		Gender	

*I hereby certify, under penalty of perjury, that:*

- *I have carefully reviewed the information above and affirm that it is correct and accurate.*
- *I am a registered voter and a resident of the City of Takoma Park, Maryland.*
- *I will have been a resident of the City for at least six months immediately preceding the election. If running to represent a ward as a City Councilmember, I will have been a resident of the ward for at least six months immediately preceding the election.*
- *I will be at least 18 years of age by the date of the election.*
- *I will comply with all requirements of the Takoma Park Code, Chapter 5.12 Fair Election Practices and Chapter 3.04 Ethics, including financial disclosure requirements for candidates.*

Signature of Candidate \_\_\_\_\_ Date \_\_\_\_\_

Office use only:

Filed with the Office of the City Clerk on \_\_\_\_\_ (date).

Voter registration confirmed.

Yes       No

\_\_\_\_\_  
City Clerk

\_\_\_\_\_  
Date