

**BETTENDORF CITY 3RD WARD
VACANCY SPECIAL ELECTION CALENDAR
3/5/2019**

Wednesday, January 16 th	First day to file candidate papers with the Scott County Auditor's Office. Candidates need 25 signatures from the 3 rd Ward.
Friday, February 8 th	Candidate filing deadline with the Scott County Auditor's Office, 5 p.m.
Monday, February 11 th	Withdrawal and Objection Deadline. Last day to withdrawal candidate papers and last day to object to nomination papers filed.
Friday, February 22 nd	Voter Registration Pre-Registration Deadline. Auditor's Office 5 p.m.
Friday, February 22 nd	Deadline to request an absentee ballot by mail, 5p.m. Auditor's Office.
Monday, March 4 th	Absentee Ballot voting in-person deadline, 5 p.m. Auditor's Office.
Tuesday, March 5 th	Special Election Day. Polls open 7 a.m. to 8 p.m.
Tuesday, March 12 th	County Canvass of Votes, 8 a.m.
Friday, March 15 th	Recount Request Deadline. 5 p.m. Written requests for a recount must be filed in the Auditor's Office by 5 p.m.

Information provided by:
Scott County Auditor's Office
Scott County Auditor Roxanna Moritz C.E.R.A.
www.scottcountyiowa.com/auditor
(536) 326-8631

**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: 3rd Ward Alderman **District or Ward** (if any): 3rd Ward

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 ___/___/___
 School on ___/___/___ Special on 03 / 05 / 19

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

Democratic Libertarian 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:

Street (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 \$1,000 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: _____	(Stamp)
Signed and sworn (or affirmed) before me on date of: _____	
By: _____ <small>Print Candidate's Name</small>	
Notary Signature: _____, Notary Public or authorized notary under §9B.10	

State of Iowa Nomination Petition for Non-Partisan Office

Candidate Information

Name of Candidate: _____ Office Sought: 3rd Ward Alderman

Candidate's County of Residence: Scott Candidate's City of Residence: Bettendorf

Type and Date of Election:

General on ___/___/___ Special on 03 / 05 / 19 School on ___/___/___ City on ___/___/___

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): 3rd Ward

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.			
4.			
5.			
6.			
7.			
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10.			
11.			
12.			
13.			
14.			
15.			