

Candidate ID

Voter ID

State of Maryland

## Candidate Information Sheet

This form is a worksheet and not an official document. The Certificate of Candidacy is the official document. This document is provided only to expedite the filing process.

*Shaded boxes are for Board use only.*

Election Year		<input type="checkbox"/> Primary	<input type="checkbox"/> General
Office Sought		District (Running In)	<input type="checkbox"/>
Congressional Only	District (Living In)	Initial	<input type="checkbox"/>
Party Affiliation	<input type="checkbox"/>		
Legal Name (As Registered to Vote)			
Name to Appear on Ballot	<input type="checkbox"/> Same as Registered to Vote		
Date of Birth	<input type="checkbox"/>	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Contact Phone (For Board Use)		Public Phone	<input type="checkbox"/> N/A
E-Mail			
Candidate Website URL	<input type="checkbox"/> N/A		
Facebook Page	<input type="checkbox"/> N/A		
Twitter Page	<input type="checkbox"/> N/A		
Other Social Media	<input type="checkbox"/> N/A		
County of Residence	<input type="checkbox"/>		
Residence Address (Number, Street, City, Zip)			<input type="checkbox"/>
Mailing Address	<input type="checkbox"/> Same as Residence		

**For Board Use Only**

Place a ✓ in each box if the required forms have been provided and after you verify the above information:

Financial Disclosure     Statement of Organization     Identification     Filing Fee  
 Ethics Employee \_\_\_\_\_  Ethics E-mail Receipt  
 Method of Payment     Visa     MasterCard     Check # \_\_\_\_\_  
 Election District \_\_\_\_\_ Precinct \_\_\_\_\_ CCF ID# \_\_\_\_\_  
 Alternate Name Affidavit    FEC ID# \_\_\_\_\_  
 SBE Staff \_\_\_\_\_ LBE Staff/MDVoters \_\_\_\_\_ (SBE only)