



**Campaign Finance Section
Unaffiliated Candidate Declaration**

With this Unaffiliated Candidate Declaration, I, _____
TYPE OR PRINT CANDIDATE'S FULL LEGAL NAME

residing at _____
TYPE COMPLETE PHYSICAL ADDRESS

hereby declare, pursuant to Title 15, Section 3002 of the Delaware Code, that I am an unaffiliated candidate in
the State of Delaware for the office of _____
TITLE OF OFFICE AND DISTRICT NUMBER

Further, I hereby affirm that I have not been affiliated with any political party that qualified as a political party
in the State of Delaware for at least three months prior to the filing of this declaration.

CANDIDATE SIGNATURE DATE

ACCOUNT NUMBER

Sworn to and subscribed before me this _____ day of _____, 20__.

SIGNATURE OF NOTARY PUBLIC