

# Certificate by Party Central Committee to Fill Vacancy in County Office or City Office

R.C. 305.02, 731.43, 733.08, 733.31. If charter county or municipality, refer to charter for specific requirements.

\_\_\_\_\_  
(MM/DD/YYYY)

\_\_\_\_\_, Ohio

To the Board of Elections of \_\_\_\_\_ County\*

The undersigned respectfully certify that a vacancy in the office of \_\_\_\_\_ ,  
for the \_\_\_\_\_ of \_\_\_\_\_ has occurred on \_\_\_\_\_ ,  
(City or County) (MM/DD/YYYY)  
due to the \_\_\_\_\_ of \_\_\_\_\_ who was a member of the  
(Death, Resignation, Etc.)  
\_\_\_\_\_ Party.

The Central Committee of the \_\_\_\_\_ Party has appointed, in accordance with law,  
\_\_\_\_\_, who is a qualified elector residing at \_\_\_\_\_ ,  
\_\_\_\_\_ , to hold the office and to perform the  
duties thereof until a successor is elected and qualified as provided by law.

\_\_\_\_\_ County Central Committee

Signed: \_\_\_\_\_, Chairperson

Address \_\_\_\_\_

Signed: \_\_\_\_\_, Secretary

Address \_\_\_\_\_

## Statement of Acceptance

I \_\_\_\_\_ hereby accept appointment to the office of \_\_\_\_\_

for the \_\_\_\_\_ of \_\_\_\_\_ , in accordance with the provisions of law.  
(City or County)

\_\_\_\_\_, Appointee

\*A copy of this certificate must be sent to the Secretary of State, 180 E. Broad Street, 15th Floor, Elections Division, Columbus OH 43215 or P.O. Box 2828, Columbus, OH 43216