

**Certification by Director of Board of Elections as to Political Party
Affiliation of the Last Occupant of a County Office**

R.C. 305.02

_____ COUNTY BOARD OF ELECTIONS

The undersigned, Director of the Board of Elections of _____ County,
respectfully certifies that the records of that board indicate that _____
was the last occupant of the office of _____ for the County of
_____, and those records indicate that _____
was affiliated with the _____ Party.

Director's Signature

MAIL TO: Ohio Secretary of State, 180 E. Broad Street, 15th Floor, Elections Division,
Columbus OH 43215 or P.O. Box 2828, Columbus, OH 43216

**WHOEVER COMMITS ELECTION FALSIFICATION
IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**