

# Questionnaire for Prospective Appointment as a Member of the \_\_\_\_\_ County Board of Elections

Please return YOUR RESUME with your completed form.

Full Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Present Home Address \_\_\_\_\_ City \_\_\_\_\_

\_\_\_\_\_ Zip Code \_\_\_\_\_ Home telephone number \_\_\_\_\_ E-mail address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Aliases or Maiden Name \_\_\_\_\_

Driver's License Number \_\_\_\_\_ SS# \_\_\_\_\_

Previous addresses in past ten years (include years of residence, city & state)

\_\_\_\_\_  
\_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_

\_\_\_\_\_ Zip Code \_\_\_\_\_ Occupation \_\_\_\_\_ Business telephone number \_\_\_\_\_

When answering the following questions, please attach additional sheets as necessary.

1. Are you currently holding any elected office?  
If yes, please identify. Yes No

\_\_\_\_\_

2. Are you currently holding any appointed office for which you must subsequently be elected? If yes, please identify. Yes No

\_\_\_\_\_

3. Have you ever been convicted of a misdemeanor (other than minor traffic-related offenses) or a felony?  
If yes, provide details of the conviction (what, when and where and final disposition) Yes No

\_\_\_\_\_

4. Are there any circumstances, which might present a conflict of interest with the administrative duties of a member of the board of elections? (see enclosed ethics policy) If yes, please identify. Yes No

\_\_\_\_\_

5. Please describe any employment or interests in contracts you have had with the board of elections within the last 24 months.

\_\_\_\_\_

6. Have you ever been required, as a candidate or campaign treasurer, to file a campaign finance report with any board of elections or the Secretary of State? Yes No

Please list all campaigns, political parties, political action committees; etc. for which a campaign finance report was filed by you as a candidate or as treasurer.

\_\_\_\_\_

7. Has a campaign in which you were involved as a candidate or treasurer ever been the subject of a referral or complaint to the Ohio Elections Commission? If yes, please explain. Yes No

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Send to: Secretary of State's Office, Attention: Myra Hawkins, P. O. Box 2828, Columbus, OH 43216