

CANDIDATE APPLICATION

Name: _____

Address: _____

Resident of Belleair Shore Since: _____

Home/Cell Phone: _____ Work Phone: _____

Voter I.D. Number: _____ Date of Birth: _____

Employment: _____

Marital Status: _____ Spouse's Name: _____

Children (names): _____

DATE: _____

Signature

RESIDENCY REQUIREMENTS

TO QUALIFY FOR OFFICE IN THE TOWN OF BEELEAIR SHORE YOU MUST BE A
RESIDENT WITHIHN THE TOWN OF BELLEAIR SHORE FOR ONE YEAR
IMMEDIATLEY PRIOR TO THE DATE OF THE ELECTION.