



Commissioners of Sudlersville
200 South Church St
Sudlersville, MD 21668

CERTIFICATE OF NOMINATION

OFFICE OF NOMINATION: _____

NAME OF CANDIDATE: _____

PLEASE HAVE FIVE (5) PERSONS WHO ***LIVE IN THE TOWN*** AND ARE ALSO ***QUALIFIED TO VOTE IN THE TOWN***
SIGN THIS FORM INDICATING THEY SUPPORT THE NOMINATION OF NAMED CANDIDATE:

(1) Sign here: _____

Print your name here: _____

Are you a registered voter in the Town or Queen Anne’s County? Yes No

(2) Sign here: _____

Print your name here: _____

Are you a registered voter in the Town or Queen Anne’s County? Yes No

(3) Sign here: _____

Print your name here: _____

Are you a registered voter in the Town or Queen Anne’s County? Yes No

(4) Sign here: _____

Print your name here: _____

Are you a registered voter in the Town or Queen Anne’s County? Yes No

(5) Sign here: _____

Print your name here: _____

Are you a registered voter in the Town or Queen Anne’s County? Yes No

**THIS COMPLETED DOCUMENT SHALL BE FILED WITH THE CLERK/TREASURER
AT LEAST THIRTY (30) CALENDAR DAYS PRIOR TO THE ELECTION.
(Reference Town of Sudlersville Charter Sections 4-4 and 4-6)**

DATE RECEIVED: _____ TIME RECEIVED: _____

CLERK/TREASURER _____ DATE _____