CANDIDATES ROSTER

This form is sent by the Election Official to the South Carolina State Ethics Commission.

RETURN TO: SC State Ethics Commission

201 Executive Center Drive, Suite 150

Columbia, SC 29210 Fax: (803) 253-7539

E-mail: karen@ethics.sc.gov

(Name of Agency Accepting Filings)	(Election Official)	
(Type of Election-City, County, School Bd. Public Service Dist., Conservation Dist.)	(Title)	
(Mailing Address)	(Telephone)	
	(E-Mail Address	
(City, State, ZIP)	IS THERE A FILING	
	Amount: \$	Office:
	Amount: \$	Office:
The following candidates have filed a Candidacy/ Pledge/ Petition_(please check √ one) Primary (date of election)	to appear on the election General Special elections	tion ballot for the
CANDIDATE'S FULL NAME	POSITION SOUGHT	For office use only