

TOWN OF LINCOLN

CONSENT OF CANDIDATE

I certify that I am presently a legal voter of the Town of Lincoln.

(or)

I have applied for addition to the checklist and I am otherwise qualified to be added to the checklist in the town in which I seek office, on or before the day of the election.

I consent to having my name printed on the ballot for the office of

_____ for a term of _____ year(s).

My name EXACTLY as it is to appear on the ballot:

Home address: _____

Mailing address, if different: _____

Telephone No: _____

E-mail address: _____

SIGNATURE of candidate: _____ **Date:** _____