## State of West Virginia PRECANDIDACY REGISTRATION FORM



## For All Statewide, Legislative, County and Municipal Offices

toward possible candid	g this form, i nereby certify and at lacy for public office, as permitted	test that I will accept c I by W. Va. Code §3-8-5	ie.
Name: Barbar	aFuller	_ Date: 8/26/19 F	Political Party: Republicar
Office: Bound o	of Education Distric	ct: Middleway	Election Year: <u>3020</u>
Residence Address:	393 Ruskingle	af Place	Kearneysville
	Telephone: (primary)		
	Sanae		
Committee Name:	nittee Name: Email Address:		
·	al agent will be: (a judicial candidate	·	
	×		
Email:	Telephone: (primary)	(	alternate)
file the committee'	Il your committee in the Campaig s finances through an internet ser r committees that file with the So	rvice provided by the Se	•
ments of the W. Va. Coo	financial transaction related to mode and the Rules and Regulations This document will serve as the aign, if applicable.	promulgated by the Se	cretary of State, including all
•		(1)	
Signature of Precand	idate: Sarbaral	Fuller	_ Date: 8/06/19
Signature of Treasure	er:		_ Date:



Published by: Secretary of State's Office State Capitol Charleston, WV 25305-0770 1-866-767-8683 elections@wvsos.com www.wvsos.com File this form with **Secretary of State** if a candidate for statewide, legislative, or judicial office.

File this form with **County Clerk** if a candidate for county office.

File this form with **Municipal Clerk/Recorder** if a candidate for municipal (city of town) office.

OFFICIAL FORM F-1 REVISED 9/17