		State of West Virginia
Check this box if this is an amendment	PF	RE-CANDIDACY REGISTRATION FORM or all statewide, legislative, county, and municipal offices.
Your Name, Committee Name, and Party Provide your full legal name, candidate comittee name, and political party.	1 Mic	ist name FEIGO First name SEAN ddle name DAVID Suffix mmittee name Political Party REPUBLICAN
Office, District, Election	-	Indeclared District/ fice <u>County Commission</u> Division <u>Hiddleway</u> Election Year <u>2024</u>
Residential Address Provide the address where you currently live.	2	Address (not P.O. Box) 167 HORNETS MEST CT. City or Jown Charles Town State WV Zip 25414 County JEFFERSON
Candidate Mailing Address Provide the address where you receive mail.	4	City or Town
Candidate Contact Information For public use.	5	Phone <u>240 409 5731</u> Email <u>Sfergo Egmail</u> , com Alternate Phone
Treasurer or Financial Agent Name Check the box if you will serve as your own treasurer or enter the full legal name of your treasurer.	6	I will serve as my own treasurer. Important: A judicial candidate is not permitted to act as his or her own treasurer. Last name FEIGO First name AlisSA Middle name Rose
Treasurer or Financial Agent Information Provide the address where your treasurer or financial agent receives mail and a phone and email where he or she may be reached. For public use.	7	Address same as candidate in section 4 Address or P.O. Box
Signature of Pre-candidate and Treasurer or Financial Agent		By filling out and signing this form, I hereby certify and attest that I will accept contributions and spend money toward possible candidacy for public office, as permitted by W. Va. Code §3-8-5e. I understand that every financial transaction related to my pre-candidacy or candidacy is subject to the requirements of the W. Va. Code and the Rules and Regulations promulgated by the Secretary of State, including, all reporting requirements. This document will serve as the oath for all electronically filed reports associated with the above listed campaign, if applicable. Pre-Candidate, sign here and date
		X Suppose Date (mm/dd/yyyy) II Oct 2023 Treasurer, sign here and date X Output Date (mm/dd/yyyy) IO II 20233
Secretar State Ca Charlest 304-558	shed by: y of State's O pitol Building on, WV 2530 -6000 s@wvsos.go	 How to return this form Mail or drop off your completed and signed form to: Secretary of State if a pre-candidate for a statewide, legislative, or judicial office, excluding magistrate. County Clerk if a pre-candidate for county office, including magistrate. County Clerk if a pre-candidate for county office, including the pre-candidat

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