

State of Iowa
Affidavit of Candidacy

Candidate's Name (exactly as it should appear on the ballot - no titles, parentheses, or quotation marks):

GERALD RAY WILSON

Candidate's Name Sounds Like (phonetic spelling):

Office Sought: TRUSTEE LECLAIRE District or Ward (if any):

Vacancy - Is the candidate running to fill a vacancy due to the death, resignation, removal, or temporary appointment of an office holder? No Yes

Type and Date of Election:

Primary on ___/___/___ General on 11/5/24
 City/School on ___/___/___ Special on ___/___/___

Candidate's Affiliation (only complete for partisan offices or Ch. 44 city nominations):

Democratic Libertarian Republican
 Not affiliated with any organization
 Name of Non-Party Political Organization: _____
No more than 5 words and exactly as it should appear on the ballot.

Candidate's Home Address:

24258-225th LECLAIRE IA 52453 SCOTT
Street (no P.O. boxes) City State Zip County

Candidate's Mailing Address (if different than above):

Street City State Zip County

Candidate's Phone: (563) 349-1081 Email: _____

Candidate's Affirmation

I swear (or affirm) that the information provided on this form is correct. I will be qualified to hold this office and if I am elected, I will qualify by taking the oath of office. I know that I cannot hold public office if I have been convicted of a felony or other infamous crime and my rights have not been restored by the governor or by the president of the United States.

I know that I am required to organize a candidate's committee, which shall file an organization statement and disclosure reports if I (or my committee) receive contributions, make expenditures, or incur indebtedness in excess of \$1,000 in a calendar year for the purpose of supporting my candidacy for public office. (This does not apply to candidates for federal office.)

I know that I cannot be a candidate for more than one office to be filled at this election, except as otherwise provided by law.

Candidate's Signature: _____

Gerald Ray Wilson
Must be signed in the presence of a notary.

State of: IA County of: Scott

Signed and sworn (or affirmed) before me on date of: 8/13/24

By: Gerald Ray Wilson
Print Candidate's Name

Notary Signature: Anna Judge



Notary Public or authorized notary under §9B.10