

WRITE-IN CANDIDATE
DECLARATION OF INTENT

LITCHFIELD COMM. SCHOOL

(NAME OF CITY, TOWNSHIP, VILLAGE OR SCHOOL DISTRICT)

As a write-in candidate for public office, you must file this form no later than 4:00 p.m. on the second Friday immediately preceding the election. You may have additional filing obligations under Michigan's Campaign Finance Act (P.A. 388 of 1976). Ask your filing official for further information.

As a write-in candidate for a precinct delegate position, you must file this form with the clerk of your city or township of residence no later than 4:00 p.m. on the first Friday immediately preceding the August primary. As an alternative, you may file this form with your board of election inspectors on the day of the August primary any time prior to the close of the polls.

Name DICK RIGGS
(Print or Type)

Residence Address 10020 HADLEY RD. LITCHFIELD 49252
(Street Address) (Post Office) (Zip Code)

City or Township of LITCHFIELD

I am registered and qualified to vote at this address: Yes No Birth Date DEC 1 26 1939

Home Phone (302) 921-3590 Business Phone ()

DATE OF ELECTION: Primary 1 1 General 11 6 2018

OFFICE SOUGHT: SCHOOL BOARD

District No. (if any) Precinct No. (if Precinct Delegate Candidate)

Partisan Office -- Party* Nonpartisan Office
(*NOTE: Required for partisan primary election only)

TERM: Regular To Fill Vacancy - Term Ending Other

JUDICIAL CANDIDATES ONLY:

- Incumbent Position - Place a check in this box if you are running for a judicial office for which the incumbent is seeking reelection.
- Non-Incumbent Position - Place a check in this box if you are running for a judicial office for which the incumbent is not seeking reelection.
- New Judgeship - Place a check in this box if you are running for a newly created judicial seat.

By signing this affidavit, I swear the statements made above are true and do hereby declare my intent to seek the above elective office as a write-in candidate.

SIGNATURE OF WRITE-IN CANDIDATE: RICHARD L. (DICK) RIGGS

Subscribed and sworn to by Richard L. Riggs Name of Notary: Judy A. Leedy

before me on the 22nd day of August, 2018 Notary Public, State of Michigan, County of Hillsdale

My commission expires 9-18-21

Judy A. Leedy
Signature of notary public

Acting in the County of Hillsdale

OFFICE USE ONLY
OFFICE CODE _____ DATE OF FILING 8, 22, 18
CFR I.D. _____ RECEIVED BY J.L.

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