



CITY OFFICE CANDIDATE FILING INFORMATION

Use this form to declare
your candidacy for city
office in Idaho.

Filing Dates and Deadlines

You must submit your complete declaration of candidacy plus the petitions to the office of the City Clerk by 5:00 pm (local time) on the last day of the candidate filing period. (*\$50-410, Idaho Code*)

All deadlines are at 5:00 pm (local time).

Candidate Filing Period

Filing Begins: August 18, 2025

Filing Ends: August 29, 2025

Withdrawal Deadline

September 5, 2025

The Clerk of the Political District must notify the county within 24 hours of a filing (*\$34-1404, Idaho Code*)

Filing Options

Candidates for city office have two options when filing for placement on the ballot:

1. Pay the filing fee

City Office: \$40.00 filing fee

Or

2. Submit nominating petitions

City Office: 5 valid signatures of eligible voters within the city

Completing the Declaration of Candidacy

When completing the Declaration of Candidacy, be sure to complete all fields and questions. Any incomplete or missing information may void your filing.

Section 1: Office Information

Enter the name of the office you are running for and the seat or district number (if applicable). Then enter the name of the city in which you are running.

Section 2: Candidate Information

When entering your Ballot Name, the following will NOT be allowed on the ballot:

- Nicknames that promote a particular political platform or are deemed offensive.
- Professional or military identifiers such as Dr., M.D., PhD., Esq., CPA, Captain, General, etc.

A phone number and email address are both required and will become publicly available upon request.

Section 3: Registered Address

- This MUST be a physical address. P.O. Boxes will not be accepted.
- If your registered address is the same as your mailing address, check the box at the bottom of this section and skip section 4.

Section 4: Mailing Address

- P.O. Boxes are acceptable.
- If your mailing address is the same as your registered address, check the box at the bottom of section 3 and leave this section blank.

Section 5: Homeowner's Exemption

If you or your spouse have claimed a Homeowner's exemption, list the address in this section.

Section 6: Campaign Finance

If your campaign finance contributions or expenditures exceed \$500, you MUST create a campaign finance account with the Idaho Secretary of State.

Visit sunshine.voteidaho.gov for more information.



DECLARATION OF CANDIDACY CITY OFFICE

Candidate Filing Period

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1

Filing for the office of _____ Seat / District (if applicable) _____
City _____

Candidate information

Enter your name as it appears on your voter registration.

Enter your name as you would like it to appear on the ballot.

Enter your phone number and email address.

2

First name _____ Middle name _____
Last name _____ Suffix (if applicable) _____

Ballot name _____
NOTE: You may not use nicknames that promote a particular political platform or are deemed offensive. Professional or military identifiers (Dr., M.D., PhD., Esq., CPA, Captain, General, etc.) are also not allowed on the ballot.

Phone number _____ Email address _____
NOTE: Your phone number and email address are both required and will become publicly available upon request.

Registered address

Must be a street address.
P.O. Boxes are not allowed.

3

Address (not P.O. Box) _____ Unit/Apt # _____
City _____ State _____ Zip _____
☐ My mailing address is the same as my residential address. (If you check this box, then skip section 4)

Mailing address

Provide the address where you receive mail.

4

Address or P.O. Box _____ Unit/Apt # _____
City _____ State _____ Zip _____

Homeowner's exemption

If you or your spouse have claimed a homeowner's exemption, provide the address.

5

☐ I or my spouse have claimed a homeowner's exemption. (If no, proceed to section 6)
Address _____ Unit/Apt # _____
City _____ State _____ Zip _____

Campaign finance

Choose only one option.

6

☐ I have already created a Campaign Finance account and appointed a Treasurer. **Or** ☐ If any campaign finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Idaho Secretary of State and appoint a Treasurer.

Signature

Re-enter the city name, office, term length, and your residence address.

7

I, the undersigned, affirm that I am a qualified elector of the City of _____, State of Idaho, and that I have resided in the city for at least thirty (30) days.

I hereby declare myself to be a candidate for the office of _____, for a term of _____ years, to be voted for at the election to be held on the **4th** day of **November, 2025**, and certify that I possess the legal qualifications to fill said office, and that my residence address is _____

Candidate, sign and date here (Required)

X

Date (mm/dd/yyyy) ____ / ____ / ____

Notary Use Only

State of Idaho
County of _____

This record was signed before me on _____,
by _____
Print name of signer(s)

Notary Signature _____

Notary Printed Name _____

My Commission Expires _____

Place Notary Seal Above



PETITION FOR CANDIDACY CITY OFFICE

Candidate Filing Period

Filing Begins: August 18, 2025
Filing Ends: August 29, 2025

Office name

1

Filing for the office of _____ Seat / District (if applicable) _____
City _____

Candidate name

2

Ballot name _____

NOTE: Enter the candidate's name as it will appear on the ballot.

This petition must be filed in the office of the City Clerk no earlier than 8:00 a.m. on the twelfth Monday and no later than 5:00 p.m. on the tenth Friday before election day. The submitted petition must have affixed thereto the names of at least five (5) qualified electors who reside within the appropriate city.

Petition signatures

3

I, the undersigned, being a qualified elector of the City of _____, in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name and that I do hereby join in the petition of _____, a candidate for the office of _____ to be voted at the election to be held on the **4th** day of **November, 2025**.

	Signature of Petitioner	Printed Name	Residence Address	Date Signed
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Circulator Signature

4

I, _____, being first duly sworn, say: That I am a resident of the State of Idaho and at least eighteen (18) years of age; that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence; I believe that each has stated his or her name and residence address correctly; and that each signer is a qualified elector of the State of Idaho, and the City of _____.

Circulator, sign and date here (Required)

X

Date (mm/dd/yyyy) ____ / ____ / ____

Notary Use Only

State of Idaho
County of _____

This record was signed before me on _____,
by _____
Print name of signer(s)

Notary Signature _____

Notary Printed Name _____

My Commission Expires _____

Place Notary Seal Above