



Candidate for National Office Filing Form

I. Candidate Information

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Date of Birth: _____

Primary Chapter: _____

Campaign Manager: _____

II. Jaycee Background

Date Joined the Jaycees: _____

Local Office History (positions and dates held)

State Office History (positions and dates held)

National and International History (positions and dates held)

III. Campaign Budget

Anticipated Income

Source

Amount

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Anticipated Itemized Expenses

Source

Amount

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

IV. Additional Requirements

Please submit the following items to Elections Committee Chair Jeri Behrmann at jbehrmann@jciusa.org:

- A. This form must be accompanied by a written recommendation of the state organization (Bylaw 7.1a)
- B. This form must be accompanied by a half-page candidate bio and a digital photo:
 - 1. Photo must be digital in .jpg or .png format.
 - 2. Photo must be 600px width by 800px height or larger.
 - 3. Photo must be a resolution of 300 dpi or higher.
 - 4. Photo must show the entire head and part of the shoulders.
 - 5. Individual must be wearing business attire.
 - 6. Photo must be in color.
 - 7. Background must be light colored solid and neutral color.
 - 8. The photograph must be taken with adequate lighting, preferably in a studio. NO selfies.
- C. Submit the required filing fee ([President-\\$750](#); [Deputy National President-\\$375](#); [NVP-\\$150](#)) as required by Policy 7-4. Please submit electronically through the links above.
- D. Submit the required damage deposit ([President-\\$500](#); [Deputy National President-\\$250](#); [NVP-\\$200](#)) as required by Policy 7-6. Deposit will be returned within 30 days after elections, after the deduction of damages if any. Please submit electronically through the links above.

V. Endorsements

We, the undersigned officers of the _____ Chapter and the _____ State, do hereby place before the Elections Committee the name of _____ for the office of (check one only):

___ President ___ Deputy National President ___ National Vice President

Chapter President Signature: _____ Date: _____

State President Signature*: _____ Date: _____

*Or highest ranking state officer if the candidate is the current State President.

VI. Candidate Affirmation

I have carefully examined this application and certify that all information is accurate and true to the best of my knowledge. If elected to serve, I shall contribute my time and effort necessary to serve to the utmost of my ability.

Candidate Signature: _____ Date: _____



Statement of Income and Expenditures

Candidate Name: _____

This report shall be submitted to the Elections Committee Chair during the annual meeting at a time determined by the Elections Committee. Please check with the Elections Committee for interpretation of classifications of income and expenses.

Income Source	Amount or Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Expense	Amount or Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

We the undersigned to hereby certify that this is a true and accurate account of funds received and expended for the campaign of the above-mentioned candidate. Attached to this report are all receipts and examples of all campaign materials. All election rules as specified by the bylaws and policies of JCI USA have been complied with.

Candidate Signature: _____

Date: _____

Campaign Manager Signature: _____

Date: _____