

**Application for Election  
Special District Director  
Special Hospital District within Sublette County**

I, the undersigned, swear or affirm that I was born on \_\_\_\_\_ (date); that I have been a resident within the proposed Special Hospital District within Sublette County since \_\_\_\_\_, residing at \_\_\_\_\_; that I am a registered voter of said proposed district and I do hereby request that my name \_\_\_\_\_, be printed on the official ballot of the next general election to be held on the 8th day of November, 2022 as a candidate for the office of director for a term of \_\_\_\_\_ years. I hereby declare that if I am elected, I will qualify for the office.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or type your name exactly as you wish it to appear on the ballot. (W.S. 22-6-111 states that professional titles and degrees shall not appear on the ballot)

\_\_\_\_\_  
Residence Address

\_\_\_\_\_  
Mailing Address (if different)

Gender:      Male ☐      Female ☐

\_\_\_\_\_  
City/Town, Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
In order to meet federal requirements for audio ballots and to accommodate individuals with disabilities, please print your name phonetically on the line above. (i.e., Kyle Balcaen Wudson would be Ky-ill Ball-kin Wood-son)

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Website Address

Filing Dates	-	August 10 through August 29, 2022
Filing Office	-	County Clerk
Filing Fee	-	None