



STATE OF TENNESSEE

_____ County

I _____, do solemnly swear (affirm) that I will support the Constitution and laws of the United States and the Constitution and laws of the State of Tennessee and that I will faithfully and impartially discharge the duties of my office.

I further swear or affirm that the information below is true and correct.

***Check the applicable statements.** Do you work for a governmental agency?

Yes No

If yes, where: _____.

I am employed by: _____ I am retired.

I serve on the following board(s) or commission(s).

***If additional space is needed, please use the reverse side of this oath.**

NAME OF BOARD OR COMMISSION	APPOINTED BY:	PAID		AMOUNT PAID MONTHLY
		YES	NO	

Mailing Address: _____

Daytime Phone #: _____ Email: _____

***Note: Pursuant to T.C.A. §10-7-503 all information on this form is public record.**

Notary Seal

State of Tennessee)
County of _____)

Commissioner's Signature

Sworn to before me this _____ day of _____, 20 _____

Notary Public

My Commission Expires: _____

Persons appointed to the county election commission shall qualify within twenty (20) days after their appointment by filing their oath of office with the Secretary of the State Election Commission. FAILURE TO QUALIFY SHALL VACATE THE OFFICE OF THE PERSON FAILING TO FILE THE OATH. Within the twenty (20) days after their appointment, the county election commission shall organize by the selection of a chairperson and secretary of different political parties from them. The commission shall, within ten (10) days thereafter, report to the state election coordinator the names and addresses of the officers and other members of the commission.

