

STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** Clarksburg City Council **Ward:** _____

(3) **Candidate's Legal Name:** Hattie Mae Wright
(First, middle and last name)

(4) **Candidate's name used in seeking office:** _____
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** Clarksburg, WV
26301
(5)(a) **Ward:** (if applicable)

(6) **Current residence address:** _____
(Specific address where candidate resides at time of filing):
238 Ocala St.
Clarksburg, WV 26301

(7) **Mailing address:** _____
(If different from residence address above):

(8) **For Partisan Elections only:** _____

I am affiliated with the following political party: _____

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304-266-8776

Daytime Phone (for public use)

hattiemwright7@gmail.com

Email Address (for public use)

Campaign Committee Name (if applicable)

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.

Hattie Wright
Candidate's Signature (must be notarized)

1/20/24
Date

(Notary Public Use Only)

State of WV, County of Harrison

Subscribed and sworn to before me this 20th day of

Jan., 2024.

Paula Hardman
Signature of Notary Public or official authorized to give oaths.



STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** City Council **Ward:** _____

(3) **Candidate's Legal Name:** Joseph Rock Romano II
(First, middle and last name)

(4) **Candidate's name used in seeking office:** Rocky Romano II
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** Clarksburg

(5)(a) **Ward:** (if applicable)

(6) **Current residence address:**
(Specific address where candidate resides at time of filing):

205 Candlelight Dr.
Clarksburg, WV 26301

(7) **Mailing address:**
(If different from residence address above):

205 Candlelight Dr.
Clarksburg, WV 26301

(8) **For Partisan Elections only:**

I am affiliated with the following political party:

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304-641-6778

Daytime Phone (for public use)

Rocky Romano 824D@gmail.com

Email Address (for public use)

Campaign Committee Name (if applicable)

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.

Rocky Romano
Candidate's Signature (must be notarized)

1/15/26
Date

(Notary Public Use Only)

State of West Virginia, County of Harrison

Subscribed and sworn to before me this 15th day of

January, 2026.

Annette M. Wright
Signature of Notary Public or official authorized to give oaths.



STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** Clarksburg City Council **Ward:** N/A

(3) **Candidate's Legal Name:** Tamira Nicole Rutter
(First, middle and last name)

(4) **Candidate's name used in seeking office:** Tamira Rutter
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** Clarksburg

(5)(a) **Ward:** (if applicable)

(6) **Current residence address:**
(Specific address where candidate resides at time of filing):
1310 Adams Ave.
Clarksburg, WV 26301

(7) **Mailing address:**
(If different from residence address above):

(8) **For Partisan Elections only:**

I am affiliated with the following political party:

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304.838.2411

Daytime Phone (for public use)

tamira4wv@gmail.com

Email Address (for public use)

Campaign Committee Name (if applicable)

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.



Candidate's Signature (must be notarized)

11/14/2026

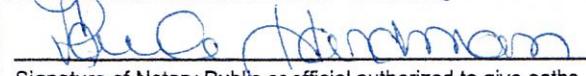
Date

(Notary Public Use Only)

State of WV, County of Hanover

Subscribed and sworn to before me this 14th day of

Nov., 2016.


Signature of Notary Public or official authorized to give oaths.



Filed

11-26 11:15 AM

THIS FORM MUST BE COMPLETE IN ORDER TO BE ACCEPTED. READ INSTRUCTIONS CAREFULLY.

STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** City Council **Ward:** _____

(3) **Candidate's Legal Name:** Trevor Wayne Vance
(First, middle and last name)

(4) **Candidate's name used in seeking office:** Trevor Vance
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** Clarksburg

(5)(a) **Ward:** (if applicable) _____

(6) **Current residence address:**
(Specific address where candidate resides at time of filing):

408 Johnson Ave

Clarksburg, WV 26301

(7) **Mailing address:**
(If different from residence address above):

//

(8) **For Partisan Elections only:**

I am affiliated with the following political party: _____

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304-672-1748

Daytime Phone (for public use)

N/A

Campaign Committee Name (if applicable)

Trevor21v@gmail.com

Email Address (for public use)

N/A

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.

[Signature]
Candidate's Signature (must be notarized)

01-14-2026

Date

(Notary Public Use Only)

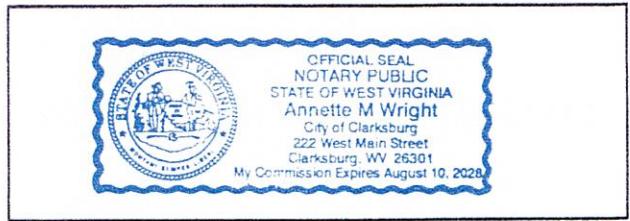
State of West Virginia, County of Harrison

Subscribed and sworn to before me this 14th day of

January 2026

Annette M. Wright

Signature of Notary Public or official authorized to give oaths.



Fred F. on 14.2026 @ 241.0m

Official Form C-1

Revised 12/17

STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** Clarksburg City Council **Ward:** _____

(3) **Candidate's Legal Name:** Andrew James Banko
(First, middle and last name)

(4) **Candidate's name used in seeking office:** Andrew J "Drew" Banko
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** _____

(5)(a) **Ward:** (if applicable) _____

(6) **Current residence address:** 2007 Goff Ave.
(Specific address where candidate resides at time of filing):

(7) **Mailing address:** _____
(If different from residence address above):

(8) **For Partisan Elections only:**

I am affiliated with the following political party: _____

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304-641-9067

Daytime Phone (for public use)

Campaign Committee Name (if applicable)

bankonravel@yahoo.com

Email Address (for public use)

drewbanko.com

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.

John M. Wright
Candidate's Signature (must be notarized)

01/12/2025
Date

(Notary Public Use Only)

State of West Virginia, County of Harrison

Subscribed and sworn to before me this 12th day of

January 12, 2025

Annette M. Wright

Signature of Notary Public or official authorized to give oaths.



STATE OF WEST VIRGINIA
Municipal Candidate's Certificate of Announcement

I hereby swear and affirm that the following information is true:

(1) **Election Type:** (Check one)

Primary General Unexpired Term

(2) **Name of Office Sought:** CLARKSBURG CITY COUNCIL **Ward:** 1/4

(3) **Candidate's Legal Name:** JAMES LOUIS MALFREGEOT
(First, middle and last name)

(4) **Candidate's name used in seeking office:** JIM MALFREGEOT
(Limited to 25 characters)

(5) **I am a resident and legally qualified voter of the municipality of:** CLARKSBURG

(5)(a) **Ward:** (if applicable) _____

(6) **Current residence address:** 613 EAST MAIN STREET
(Specific address where candidate resides at time of filing):
CLARKSBURG, WV 26301

(7) **Mailing address:**
(If different from residence address above):

(8) **For Partisan Elections only:**

I am affiliated with the following political party: _____

By filling out this space, I hereby certify and attest that I am a member of and affiliated with this political party as evidenced by my current voter's registration and I have not been registered as a member of another political party within sixty (60) days of this date, pursuant to W. Va. Code §3-5-7(d)(6).

304-677-1083

Daytime Phone (for public use)

absolute613@aol.com

Email Address (for public use)

Committee to Elect Jim Malfregeot

Campaign Committee Name (if applicable)

Campaign Website (if applicable)

I swear or affirm that I am a candidate for this office in good faith, that I am eligible and qualified to hold this office, and that the information provided on this form is true.

James L. Malfregeot
Candidate's Signature (must be notarized)

1/12/2026

Date

(Notary Public Use Only)

State of West Virginia, County of Harrison

Subscribed and sworn to before me this 12th day of

January, 2026.

Annette M. Wright
Signature of Notary Public or official authorized to give oaths.

