



STATE OF ARIZONA

Write-in Candidate
NOMINATION PAPER
AFFIDAVIT OF QUALIFICATION
CAMPAIGN FINANCE LAWS STATEMENT
[A.R.S. §§ 16-311, 16-312, 16-905(I)(5)]

FOR OFFICE USE ONLY

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of
for the Party (if
applicable) to be voted on at the PRIMARY or GENERAL (circle one) election to be held on

I will have been a citizen of the United States for year(s) next preceding my election and will have
been a citizen of Arizona for year(s) next preceding my election and that my age is, and
my date of birth is the day of, 19, and have resided in
County for year(s) and in precinct for year(s) before my election.

I do solemnly swear (or affirm) that at the time of filing, I am a resident of the county, district or precinct
which I propose to represent, I have no final, outstanding judgments against me of more than an aggregate of \$1,000
that arose from failure to comply with or enforcement of ARS Title 16, Chapter 6, and as to all other qualifications, I
will be qualified at the time of election to hold the office that I seek, having fulfilled the constitutional and statutory
requirements for holding said office.

Actual residence address or description of place of residence (city or town) (zip)

Post office address (city or town) (zip)

Print or type your name on the following line as you wish it to be listed
on the Notice of Official Write-In Candidates.

LAST NAME

FIRST NAME

CANDIDATE SIGNATURE

State of )
County of )

Subscribed and sworn to (or affirmed) before me this day of, 20.

Notary Public

(Seal)

I have read all applicable laws relating to campaign financing and reporting.

CANDIDATE SIGNATURE