



STATE OF ARIZONA

Write-in Candidate
NOMINATION PAPER
DECLARATION OF QUALIFICATION
A.R.S. §§ 16-311, 16-312

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
day of
, 20. I will have been a citizen of the United States for
years before
my election and will have been a citizen of Arizona for
years before my election. I am
years old and my date of birth is
,
, and I have resided in
County for
years, in precinct
for
years before my election, and I currently reside in the city or town I propose to represent. I meet
the write-in eligibility requirements pursuant to A.R.S. § 16-312(F).

Actual residence address City or town Zip
or description of place of residence (required)

Post office address (if applicable) City or town Zip

Print or type your name on the following line in the exact manner you
wish it to be listed on the Notice of Official Write-In Candidates, last name first.
LAST NAME FIRST NAME

I declare, under penalty of perjury, that the information in this Nomination Paper and Declaration of
Qualification is true and correct, and that at the time of filing I am a resident of the county, city, town, district,
ward, or precinct which I propose to represent, that I have no final, outstanding judgments against me of an
aggregate of \$1,000 or more that arose from failure to comply with or enforcement of campaign finance law,
and as to all other qualifications, I will be qualified at the time of election to hold the office that I seek.

CANDIDATE SIGNATURE DATE