



STATE OF ARIZONA

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

My Commission Expires: _____

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

CANDIDATE SIGNATURE