



MARICOPA COUNTY
NOMINATION PAPER
AFFIDAVIT OF QUALIFICATION
CAMPAIGN FINANCE LAWS STATEMENT
[A.R.S. §§ 16-311, 16-905(K)(5)]

VOTER ID # _____

Place Date Stamp Here

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of

_____ (here name the office sought and the political division or district)

subject to the action of the _____ Party, at the **Primary Election** to be held on **AUGUST 24, 2010***, and at the **General Election** to be held on **NOVEMBER 2, 2010**, should I be nominated.

I will have been a citizen of the United States for _____ years next preceding my election and will have been a citizen of Arizona for _____ years next preceding my election and will meet the age requirement for the office I seek and have resided in **MARICOPA** County for _____ years and in _____ voting precinct for _____ years 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.

Residence address or description of place of residence _____ (city or town) _____ (zip)

Mailing Address _____ (city or town) _____ (zip)
(if different from residence address)

Print or type your name below in the exact manner you wish it to appear on the ballot. A.R.S. § 16-311.G. (your ballot name will appear in ALL CAPS, Last Name first)

_____, _____, _____
 LAST NAME FIRST NAME MIDDLE INITIAL (if any)

X _____
 CANDIDATE SIGNATURE

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.

X _____
 CANDIDATE SIGNATURE

*revised 9/9/2009