FOR OFFICE USE ONLY

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A.R.S. §§ 16-311, 16-312											
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You	are	hereby	notified	that	I,	the	undersigned,	a qualified elector, am	а	candidate	

for the office of		for the	
Party (if applicable), at the PRI	MARY or GENERAL (ci	rcle one) Election to be held	on the
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 da	te of birth is
	, and therefore I will me	eet the Constitutional and/or statu	tory age
(Month & Day) (Yea	,		
requirement for taking said office.	I have resided in	county for _	years, and
have resided in	precinct for	years.	
Actual residence address or description of place of residence	e (required)	City or Town	Zip
Post office address (if applicable)		City or Town	Zip
Print or type your	name on the following	g line in the exact manner yo	ou
wish it to app	ear on the Notice of O	fficial Write-In Candidates.	
		- FIDOT MANE	
LAST NAME		FIRST NAME	
I declare, under penalty of Qualification is true and correct, precinct, that I have no final, our arose from failure to comply with will be qualified at the time of electric further certify that I am not disqual	and that at the time of f tstanding judgments agair or enforcement of campaig ection to hold the office the	nst me of an aggregate of \$1,00 gn finance law, and as to all other nat I seek. If running in the Ger	nty, district, or 00 or more that qualifications, lateral Election, lateral
CANDIDATE SIGN	 IATURE	DATE	