



COCHISE COUNTY
ELECTIONS DEPARTMENT
WRITE-IN CANDIDATE NOMINATION PAPER
AFFIDAVIT OF QUALIFICATION
CAMPAIGN FINANCE LAWS STATEMENT
[A.R.S. §§ 16-311, 16-312, 16-905(I)(5)]

Date Received:

ID #:

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 _____ years next preceding my election and will have been a citizen of Arizona for _____ years next preceding my election and that my age is _____, and my date of birth is the _____ day of _____, 20____, and have resided in **Cochise County** for _____ years and in 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, 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 in the exact manner you wish it to appear on the Notice of Official Write-In Candidates.

LAST NAME

FIRST NAME

MIDDLE NAME or INITIAL
(or Nickname-if any)

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

CANDIDATE SIGNATURE

State of Arizona
County of Cochise

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

(Seal)

Notary Public