



**STATE OF ARIZONA  
PINAL COUNTY  
NONPARTISAN NOMINATION PAPER  
AFFIDAVIT OF QUALIFICATION CAMPAIGN  
FINANCE LAWS STATEMENT  
[A.R.S. §§ 16-311; 16-905(K)(5)]**

FOR OFFICE USE ONLY
ID# _____

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of \_\_\_\_\_ at the General Election 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 will meet the age requirement for the office I seek and have resided in Pinal County for \_\_\_\_\_ years and in the district/precinct \_\_\_\_\_ before my election.

I do solemnly swear (or affirm) that, at the time of filing, I am a resident of Pinal County, the 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 or description of place of residence	City or Town	Zip Code
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Post Office Address	City or Town	Zip Code
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**PRINT OR TYPE YOUR NAME ON THE FOLLOWING LINE IN THE EXACT MANNER YOU WISH IT TO APPEAR ON THE BALLOT (A.R.S. §16-311.G)**

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

\_\_\_\_\_  
CANDIDATE SIGNATURE

Subscribed and SWORN to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

(Seal)

\_\_\_\_\_  
Notary Public