



**MARICOPA COUNTY  
PRECINCT COMMITTEEMEN**

NOMINATION PAPER  
AFFIDAVIT OF QUALIFICATION  
[A.R.S. §§ 16-312]

VOTER ID # \_\_\_\_\_

Place Date Stamp Here

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

**PRECINCT COMMITTEEMEN** - \_\_\_\_\_  
(PRECINCT NAME / LEG DISTRICT)

subject to the action of the \_\_\_\_\_ Party, at the

**Primary Election** to be held on **AUGUST 28, 2012.**

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)

**Additional Contact Information:** (Optional)

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_