



City of Eloy
Nonpartisan
Nomination Paper
Declaration of Qualification
A.R.S. § 16-311

FOR OFFICIAL USE ONLY

You are hereby notified that I, the undersigned, a qualified elector of the City of Eloy, am a candidate for the office of **COUNCIL MEMBER** at the election to be held on August 4, 2020.

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 and will meet the age requirement for the office I seek and I have resided in the City of Eloy, Pinal County for _____ years, before my election, and I currently reside in the city I propose to represent.

Actual residence address or description of place of residence (required)	City or town	Zip Code
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Post office address (if applicable)	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, last name first.

LAST NAME	FIRST NAME
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I declare, under penalty of perjury, that the information in this Nomination Paper and Declaration of Qualification is true and correct, and that at the time of filing I am a resident of the county, city, town, district, ward, or precinct which I propose to represent, that I have no final, outstanding judgments against me of an aggregate of \$1,000 or more that arose from failure to comply with or enforcement of campaign finance law, and as to all other qualifications, I will be qualified at the time of election to hold the office that I seek.

CANDIDATE SIGNATURE

DATE