



JOY WHITING

P.O. Box 548, St. Johns, AZ 85936

Telephone: (928) 337-7539

"Our kids, their future."

Date Stamp: _____

Voter ID # _____

**APACHE COUNTY SCHOOL GOVERNING BOARD
WRITE-IN CANDIDATE
Nomination Paper/Declaration of Qualifications
A.R.S. §16-311. 16-212**

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

(name of the office sought and the political division or district and, if for a 2 year term, the expiration date)

in the **General Election** to be held on _____, **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 date of birth is __/__/____, and therefore I will meet the Constitutional and/or statutory age requirement for taking said office. I have resided in APACHE County for ____ years and within _____ school district for ____ years before my election.

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, district 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. I further certify that I am not disqualified from running as a write-in candidate pursuant to A.R.S. 16-321(F).

Residence address or description of place of residence _____ (city or town) _____ (zip code)

Mailing address (if different from residence address) _____ (city or town) _____ (zip code)

Print or type your name below in the exact manner you wish it to appear on the Notice Of Official Write In Candidates. A.R.S. 16-312.

(Name will appear Last Name, First Name in ALL CAPS)

Last Name First Name Middle Name or Initial
(or nickname – if any)

X _____
Candidate Signature

Date