



STATE OF ARIZONA

Nonpartisan
NOMINATION PAPER
DECLARATION OF QUALIFICATION
A.R.S. § 16-311

FOR OFFICE USE ONLY
#02-2018

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

Safford City Council at the election to be held on August 28 2018

I will have been a citizen of the United States for 64 years before my election and will have been a citizen of Arizona for 64 years before my election and will meet the age requirement for the office I seek and have resided in Graham County for 60 years and in precinct Safford for 40 years before my election.

1216 W 18 ST Safford 85546
Actual residence address City or Town Zip
or description of place of residence (required)

Post office address (if applicable) City or town Zip

Print or type your name on the following line in the exact manner you wish it to appear on the ballot, last name first.
LOPEZ Arnold
LAST NAME FIRST NAME

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.

Arnold Lopez
CANDIDATE SIGNATURE

5-21-18
DATE