



STATE OF ARIZONA

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

FOR OFFICE USE ONLY

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of CITY COUNCIL at the election to be held on AUGUST 28, 2018.

I will have been a citizen of the United States for 49 years before my election and will have been a citizen of Arizona for 48 years before my election and will meet the age requirement for the office I seek and have resided in GRAHAM County for 26 years and in precinct 5 for 15 years before my election.

1034 CENTRAL AVE. SAFFORD, AZ 85546
Actual residence address City or Town Zip
or description of place of residence (required)

PO BOX 601 SAFFORD, AZ 85548
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.
HEMPHILL LAST NAME BRAD 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.

[Signature]
CANDIDATE SIGNATURE

4-4-18
DATE