

Affidavit of Intent for Write-In Designation

Office Use Only:

Complete and sign. Please type or print legibly.

Office Information

This is to certify that I declare the intent to be a write-in candidate for the office listed below

Title of Office District

Write-in Candidate for the: Primary Election OR General Election

Qualifications for Office (You must list the specific qualifications for this office)

Candidate Information

Full Legal Name

Name exactly as it will appear on the write-in list

Residence & Mailing Address

Residence Street Address Apt/Unit

City State Zip Code

Mailing Address Apt/Unit

City State Zip Code

Telephone & E-mail Address

Business Phone # Extension

Residence Phone # E-mail Address

Voter Registration Information

Year of Birth County of Registration

Party Affiliation Date of Affiliation

Signature

Applicant's Affirmation

I hereby intend to run for the office stated above and solemnly affirm that I meet all qualifications for the office prescribed by law. Furthermore, the information provided on this form is, to the best of my knowledge, true and correct.

Signature of Candidate

Date of Signing

[seal]

STATE OF COLORADO)
) ss.
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 20____ by _____ .
Day Month Year Printed name of Candidate Above

Signature (and Title) of Notary / Official Administering Oath _____

My Commission Expires: _____