

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 Street 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. [seal]

Signature of Candidate _____ Date of Signing _____

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: _____