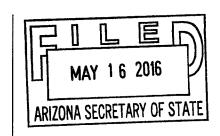


STATE OF ARIZONA

NOMINATION PAPER AFFIDAVIT OF QUALIFICATION CAMPAIGN FINANCE LAWS STATEMENT [A.R.S. §§ 16-311, 16-905(I)(5)]



FOR OFFICE USE ONLY

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of
action of the horizontal party, at the Primary Election to
be held on Aug 3074 2016 , and at the General Election to be held
N $\sim 8^{-1}$ ~ 2016 , should I be nominated.
I will have been a citizen of the United States for <u>66</u> years next preceding my election and will
have been a citizen of Arizona for 2 c years next preceding my election and will meet the age
requirement for the office I seek and have resided in Mariana County for 26 years and in
precinct Aquila 0006 for 17 years before my election.
I do solemnly swear (or affirm) that at the time of filing, I am a resident of the county, district or
precinct which I propose to represent, I have no final, outstanding judgments against me of more than an
aggregate of \$1,000 that arose from failure to comply with or enforcement of ARS Title 16, Chapter 6, and as
to all other qualifications, I will be qualified at the time of election to hold the office that I seek, having fulfilled
the constitutional and statutory requirements for holding said office.
Actual residence address or description of place of residence (city or town) (zip)
Da A = 1011
Post office address (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. A.R.S. § 16-311(G).
Koons
LAST NAME , FIRST NAME
S. 14/
State of Win (eps.) County of Whin (eps.)
Subscribed and sworn to (or affirmed) before me this day of, 20
ALYSSA K.MCKINLEY Notary Public - State of Artzona MARICOPA COUNTY My Commission Expires October 27, 2016
I have read all applicable laws relating to campaign financing and reporting

CANDIDATE SIGNATURE