

OFFICE INFORMATION					
Write-In For the Office Of:		City:			Term Length:
					Totti Length,
CANDIDATE INFORMATION					
Candidate Name (As it appears on your voter regi	stration	record.)			
First	MI				Suffix
Residence Address (As it appears on your voter it	egistrat	ion record.)			1
Street Address	City		State	Zip Code	County
CAMPAIGN FINANCE INFORMATION					
☐ I do hereby certify that I am a registered elector	of the	State of Idaho and annois	at munalf as	transportar for my	annoles If any annoles
finance contributions or expenditures reach or e	exceed \$	500, I will create a Cam	paign Finan	ce account with th	ampaign, ir any campaign e Secretary of State, and may
at that time, appoint another person as Treasure	er or rer	nain as my own Treasure	Эг.		
CERTIFICATION	-			·	
I, the undersigned, being a resident of the	State	if Idaho and of the City li	sted above	do hereby declare	myself a candidate for the
I, the undersigned, being a resident of the State of Idaho and of the City listed above, do hereby declare myself a candidate for the office entered above to be voted on at the Election to be held on the day of, 2021 and I certify that the					
information on this Declaration is true and accurate).				
I further certify that I possess the legal quantum have resided in the city for at least thirty (30) days.	alificatio	ns to hold said office, the	at I am a qua	alified elector of th	e City listed above, and that I
A.M. Are presentative and the distribution of the second	1 0 4				
Dated:	Candio	date Signature:			
Subscribed and sworn to before me this da	y of				
Signature:					
Notary Public in and for the State of Idaho, residing	ıat				
H 0 7 7 7 7 7					
My Commission Expires:					
					and the second s
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	OF	FICIAL USE O	NLY		
CITY CLERK	-				
Before accepting this Declaration of Intent, the City city elector as defined in Idaho Code 50-402(c) and registration.	Clerk (dithat the	or designee) must verify e residence address pro	that the pervided above	son submitting this matches the addr	declaration is a qualified ess on the individual's voter
This declaration was accepted by			on	Dale	at
Name, Title A copy of this form must be transmitted to the County Clerk as soon as possible after it is filed.					
COUNTY CLERK		•			
Upon receipt of this Declaration of Intent, stamp the	n date n	nd time of receipt on the	front of this	document	