

Candidate Acceptance of Petition Nomination

Office Use Only:

Complete, sign, and attach to the petition. Please type or print legibly.

Office Information

This is an Acceptance of Petition Nomination and Declaration of Qualification for:

Title of Office District

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 official ballot

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: _____