

AFFIDAVIT OF INTENT TO BE A WRITE-IN CANDIDATE

C.R.S. 1-8-305; 1-32-1-103(5); 1-4-1101; 1-4-1102(2); 1-4-501; 1-45-109(1); 1-45-110; SOS CPF Rule 16

I, _____
(full name of the candidate)

who reside at: _____
(residence street name and number)

_____ (city or town, zip code)

_____ (county), (state)

_____ (mailing address if different from residence address)

whose email address is: _____
(email address)

whose telephone number is: _____
(xxx) xxx-xxxx

desire the office of Director for:

_____ a term expiring on May 5 of 2020; or _____ a term expiring on May 3 of 2022
on the Board of Directors of the Proposed Arkansas Valley Ambulance District at the Organizational
Election on November 6, 2018, **and will serve if elected.**

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

- _____ A resident of the Proposed District, or area to be included in the district; or
- _____ The owner (or spouse/civil union partner of owner) of taxable real or personal property situated within the boundaries of the Proposed District, Spouse's Name, if property is in spouse's name: _____
- _____ A person who is obligated to pay taxes under a contract to purchase taxable property within the Proposed District.

I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act as required in § 1-45-110 of the Colorado Revised Statutes, I will not, in my campaign for this office, receive contributions or make expenditures exceeding \$200 in the aggregate during the election cycle, however, if I do so, I will thereafter file all disclosure reports required under the fair campaign practices act.

DATED this _____ day of _____, 20____.

WITNESSED by the following registered elector:

(Signature of Candidate)

(Signature of Witness)

(Printed Full Name of Candidate)

(Printed Full Name of Witness)

(email address)

(Residence address)

(Telephone Number)

(City or Town, Zip Code)

Before me, _____, a notary/officer duly authorized to administer oaths, in and for said State, personally appeared _____, whose name is subscribed to the forgoing Affidavit of Intent to Be A Write-In Candidate, and who being first duly sworn, upon oath says, that the foregoing statements are true and he/she acknowledges the execution of said instrument to be of his/her own free act and voluntary deed for the uses and purposes therein set forth.

Subscribed and affirmed to before me this _____ day of _____, 20 ____.

STATE OF COLORADO
COUNTY OF _____

Seal

(Notary/Official Signature)

My Commission Expires _____

(Title)

AFFIDAVIT OF INTENT TO BE A WRITE-IN CANDIDATE, continued

For Use by the Designated Election Official:

Received on: _____ (Date), at: _____ (Time) Received by: _____ (Name)
County in which the district court that authorized the creation of the special district is located: _____ **County.**
Copy sent to Secretary of State on: _____ (Date) [no later than 60 days before election only if election will not be cancelled]

PROCEDURAL INSTRUCTIONS: This is a sample form only. Review use with attorney. The Affidavit of Intent shall be filed by the close of business on the sixty-fourth day before the election. The DEO will prepare a list of the names of the individuals who filed the affidavit of intent for use by the judges at the polling place.

***** ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!**