

Office of the Minnesota Secretary of State AFFIDAVIT OF CANDIDACY

Filing # 03 -2022

Cash/Check # Cash

Amount \$ 2.00

Instructions

All information on this form is available to the public. Information provided will be published on the <u>Secretary of State's website</u>. If filing for partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (Minn. Stat. 204B.03)

| partisan office and not a major party candidate, you must me both an amdavit of c | andidacy and a nonimoti | ig pedition. (iv. | m. stat. 2040.03) |
|---|--|--------------------|-------------------------------------|
| Candidate Information Name and Office Candidate Name (as it will appear on the ballot) Oan iele | inderse. | n | |
| Office Sought Council Member | | District # | |
| For Partisan Office, Provide Political Party or Principle | | Districe | |
| | | | |
| For Judicial Office, Provide Name of Incumbent | | | |
| Residence Address Oo not complete if residence address is to be private and checkbox below is marke udicial, county attorney, and county sheriff office candidates. | d. All address and contact | t information is | s optional for federal, |
| Street Address 8794 Forest Drive | | | |
| city Mountain Fron | State K_n | Zip Code | 55768 |
| My residence address is to be classified as private data. I certify a police rep (or my family's) safety, or my address is otherwise private by Minnesota law. | | | |
| Campaign Address and Contact Candidate Phone Number (Required) 216 - 410 - 856 | 56 | | |
| Campaign Contact Address (Required for those who have checked the box above): | _ | | |
| Street Address | | | |
| City | State | Zip Code | |
| Website Email | | | |
| I will have maintained residence in this district for at least 30 days before the ge If a major political party candidate, I either participated in the party's most rece party's candidates at the next general election. If filing for one of the following offices, I also swear (or affirm) that I meet the rece United States Senator – I will be an inhabitant of this state when elected and I were the party of the state of | ent precinct caucuses or in quirements listed below: will be at least 30 years old | d and a citizen | |
| not less than nine years on the next January 3rd, or if filled at special election, w United States Representative – I will be an inhabitant of this state when elected | THE STATE OF THE S | | citizen of the United |
| States for not less than seven years on the next January 3rd, or if filled at specia | The second secon | | |
| Governor or Lieutenant Governor – I will be at least 25 years old on the first Mo | onday of the next January | and a residen | t of Minnesota for not |
| less than one year on election day. I am filing jointly with Supreme Court Justice, Court of Appeals Judge, District Court Judge, or County | Attorney – I am learned | in the law and | licensed to practice law |
| in Minnesota. My Minnesota attorney license number is | and a copy of my l | icense is attac | hed. |
| State Senator or State Representative – I will be a resident of Minnesota not le | ss than one year and of th | nis district for s | ix months on the day of |
| the general or special election. County Sheriff – I am a licensed peace officer in Minnesota. My Board of Peace | Officer Standards and Tra | ining license n | umber is |
| and a copy of my license is attached. | | | |
| School Board Member – I have not been convicted of an offense for which regis | | | |
| County, Municipal, School District, of Special District Office – I meet any other | qualifications for that offi | ce prescribea | by law. |
| Candidate Signature / / w/ | Date <u> </u> | 2022 | |
| Subscribed and sworn to before me this day of MW | 20_22 | | LISA ELAINE STE |
| Notary public or other officer empowered to take and certify acknowledgement | | | MINNESOTA Notary stamps xpires 011 |