

Affidavit of Candidacy for City, Town, School District & Special District Candidates

Applies to the offices

- City: Mayor, City Council
- Town: Clerk, Supervisor, Treasurer
- School Board Member
- Local Special District

If you are looking for information on filing for a federal, state, or county office, visit mnvotes.gov/candidates to select the office of your choosing.

NOTE: payment methods for filing fees vary by office. If you only have *card*, inquire with your filing office first before visiting in case they cannot support card payments.

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Affidavit of Candidacy

Information on this affidavit is public data unless noted as private. See the reverse side for more filing information.

Filing # _____ Fee Amount \$ _____
Circle payment method:
 Cash | Card | Petition | Check # _____
 Viewed ID or proof of residence
 Reviewed affidavit for completeness

Candidate Information

Candidate name as it will appear on the ballot _____
Clearly write or type in mixed upper- and lower-case | Include punctuation and accents | No professional titles

Candidate name pronunciation sounds like _____
If left blank, the accessible ballot marking device's default pronunciation of your name will be used

Office sought _____ **District /Seat number** if applicable _____

Contact Information

Email non-government _____

Phone number _____

Check box if you do not have email
 If you check both this box and the private box below, you must provide an address in *Campaign Contact*

Residence Address

REMAIN PRIVATE Both boxes must be checked **OR** **NOT PRIVATE** Must provide if boxes to the left are not checked

I request that my residence address be classified as private data.

I have completed the *Address of Residence Form* on the next page.

Residence street address

City _____

State _____ **Zip code** _____

Campaign Contact

Campaign address Optional unless private boxes checked and no email provided _____

City _____ **State** _____ **Zip code** _____

Campaign website Optional _____ can be updated with filing officer any time

Affirmation & Signature I swear (or affirm):

- This is my true name or the name by which I am generally known in the community.
- I am eligible to vote in Minnesota.
- I have not filed for the same or any other office at the upcoming primary or general election (unless authorized by Minn. Stat. 204B.06, subd. 9).
- I am, or will be on assuming office, 21 years of age or more.
- I will have maintained residence in this district for at least 30 days before the general election.
- I have provided valid identification or documentation of proof of residence authorized in Minn. Stat. 204B.06, subd. 1b that matches the residence address information provided on this affidavit or on a separate form, if address is classified as private data.
- I have provided my phonetic name pronunciation above or I certify that I am directing the official responsible for programming materials for the election to use the applicable technology's default pronunciation of my name.
- If filing for **School Board Member**: I also swear (or affirm) I have not been convicted of an offense for which registration is required under Minn. Stat. 243.166.
- I meet any other qualifications for this office prescribed by law.

Candidate signature _____ **Date** _____

Signature of notary public or other officer empowered to take and certify acknowledgment _____

Subscribed and sworn to before me this _____ **day of** _____, **20** _____

Notary stamp

City, Town, School District, and Special District Affidavit of Candidacy Reminders

Candidate Filing Location

- Candidates for Mayor, Council Member, and other elected city offices must file with the city clerk.
- Candidates for Town Clerk, Town Supervisor, Town Treasurer, and other elected township offices must file with the town clerk.
- Candidates for School Board Member must file with the school district clerk.
- Candidates for special districts such as hospital or park districts should contact the district's office for information on the filing process.

Contact and Residence Information

- If candidates check the "My residence address is to be classified as private data" box, they must also complete the Address of Residence form below and provide a campaign contact email or mailing address on their affidavit.
- Residence address must be where candidate maintains residence and cannot be a PO Box.
- Candidates may contact their filing officer after filing to update the campaign information.
- When filing, candidates must provide ID or other documentation (authorized in Minn. Stat. 204B.06, subd. 1b) that matches the residence address.

Timeframe for Filing & Fees

- Affidavits must be submitted during the designated filing period, with the noted exception: candidates for municipal offices, special district, and school board member who will be absent from the state during the filing period may submit the affidavit early (Minn. Stat. 205.13 subd. 1b; Minn. Stat. 205A06, subd. 1c).
- Affidavits may be mailed in or dropped off by others, but must:
 1. be notarized,
 2. include a copy of identification or other documentation authorized in Minn Stat. 204B.06 subd. 1 that matches the residence address on the affidavit,
 3. have all other required information completed, and
 4. have payment for filing fee included. Completed affidavits and filing fees must be received by the filing officer within the filing period.

Filing fees and additional candidate filing information can be found at mnvotes.gov/candidates.

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Address of Residence Form

This form must be completed when a candidate has checked the Private Data box, certifying that their address of residence for the purposes of candidate filing should be classified as private data. This information will be available to the filing officer and other elections officials with whom that filing officer consults to verify that the residence address matches the address provided on the candidate's identification or proof of residence documentation.

Candidate name and address of residence

Candidate Name _____

Office sought _____ District/seat (if applicable) _____

Residence Address _____

City _____ State _____ Zip code _____

Signature of candidate _____ Date _____

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