



Declaration of Candidacy of \_\_\_\_\_

for the office of Council Member Ward IV

STATE OF NEVADA, CITY OF HENDERSON

For the purpose of having my name placed on the official ballot as a candidate for the office of Council Member Ward IV, I, \_\_\_\_\_, the undersigned do swear or affirm under penalty of perjury that I actually, as opposed to constructively, reside at \_\_\_\_\_, in the City of Henderson, County of Clark, State of Nevada; that my actual, as opposed to constructive, residence in the city, township, or other area prescribed by law to which the office pertains began on a date at least 12 months immediately preceding the date of the close of filing of declarations of candidacy for this office; that my actual, as opposed to constructive, residence in the ward I seek to represent began on a date at least 30 days immediately preceding the date of the close of filing of declarations of candidacy for this office; that my telephone number is \_\_\_\_\_, and the address at which I receive mail, if different than my residence, is \_\_\_\_\_; that I am a qualified elector pursuant to Section 1 of Article 2 of the Constitution of the State of Nevada within the ward I seek to represent; that if I have ever been convicted of treason or a felony, my civil rights have been restored by a court of competent jurisdiction; that if nominated as a candidate at the ensuing election I will accept the nomination and not withdraw; that I will not knowingly violate any election law or any law defining and prohibiting corrupt and fraudulent practices in campaigns and elections in this State; that I will qualify for the office if elected thereto, including, but not limited to, complying with any limitation prescribed by the Constitution and laws of this State concerning the number of years or terms for which a person may hold the office; and my name will appear on all ballots as designated in this declaration.

\_\_\_\_\_  
Signature of Candidate for Office

Subscribed and sworn to before me this \_\_\_\_\_

\_\_\_\_\_  
Designation of Name to Appear on Ballot

day of the month of \_\_\_\_\_, of the year \_\_\_\_\_

\_\_\_\_\_  
If elected, designation of name to appear on certificate of election

\_\_\_\_\_  
E-mail Address (optional)

\_\_\_\_\_  
Notary Public or other person authorized to administer an oath