Declaration of Candidacy

> > Notary Public in and for the State of Idaho
> > Residing at
> > My Commission expires
> >
> > | 130 | 19

OFFICIAL USE ONLY

CITY CLERK

Before accepting this Declaration of Candidacy, the City Clerk (or designee) must verify:

This declaration is accompanied by:

The attached Petition of Candidacy signed by at least five qualified city electors with the attached verification from the county clerk,

OR

A nonrefundable filing fee of \$40.

The City Clerk (or designee) must verify that the person submitting this declaration is a qualified city elector as defined in Idaho Code 50-402(c) and that the residence address provided above matches the address on the individual's voter registration.

This declaration was accepted by Laurie Hopkins, City Clerk

on September 7, 2017 at 932 AM

After the close of the candidate filing period, a copy of this form must be transmitted immediately to the County Clerk to assist in ballot preparation.

COUNTY CLERK

Upon receipt of this Declaration of Candidacy, stamp the date and time of receipt on the front of this document. This document is to be used for ballot preparation.

COUNTY CLERK AFFIDAVIT CERTIFICATION OF SIGNATURES ON PETITION

)

County of Latah) SS.					
To the Honorable Laurie H	opkins, Clerk, C	ity of Moscow:				
I, Henrianne K. Westberg, Co	ounty Clerk of La	atah County hereby certify that/2				
signatures on this petition are those of qualified electors.						
* AND RECORDE	A Marian (S	Signed) <u>Cletoria Shortt</u> County Clerk or Deputy Date				

Key to Comments:

State of Idaho

O.K.-Registered Elector.

A.C.-Elector is not registered at residence street and number given on petition.

Ill.-Cannot identify name of elector.

Dup.-Duplicate-2nd signature of elector on petition

N.R.-Not a registered elector

N.R.D.-Not a registered elector in taxing district/zone

on petition

P.O.-P.O. Box was given as residence address-physical address is necessary.

Petition of Candidacy

PETITION OF CANDIDACY

C	DF	HM A. W	UEBER			
FOR OFFICE OF And Control Member						
This petition must be filed in the office of the City Clerk not earlier than 8:00 a.m. on the eleventh Monday nor later than 5:00 p.m. on the ninth Friday immediately preceding election day. The submitted petition must have affixed thereto the names of at least five (5) qualified electors who reside within the appropriate city.						
I, the undersigned, being a qualified elector of the City of Moscow, in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name and that I do hereby join in the petition of <u>John A Weber</u> , a candidate for the office of <u>City Councie</u> to be voted at the election to be held on the 7th day of November, 2017.						
)		ne election to be ne	erd on the 7th day of November	, 2017.		
Signature of Petitioner	Printed Name	20000	Residence Address	Date Signed		
Drug Jan Us	W. Iliam 1	LAMBING	1216 Pantorosa Da	9/3/7		
Marital.	Masc Trivel	NAME OF TAXABLE PARTY.	411 Harrist Dr	9/6/17		
Man Gould	RUSS WHAD	pt NJ IRF	705 5 Jehreise	916/17 Ve H=		
System Watton	Kristie Ma	Jebr	921 Lewis	6 Seet 201		
Althorate 1 (2)	WALTER -	UKKY	218 Sparing W	9-6-1		
Jan S. Varl	JERI S. I	POOL	306 SUSAN DR	9-6-17		
West Horse	Rod Ha		721 Park Dr.	9-6-17		
STATE OF IDAHO County of						
I,, being first duly sworn, say: That I am a resident of the State of Idaho and at least eighteen (18) years of age; that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence; I believe that each has stated his or her name and residence address correctly, and that each signer is a qualified elector of the State of Idaho, and the City of Moscow.						
Signed Signature Collector	1/		Address of Signature Collector	<u>ID 83843</u>		
	Subscribed and swo	orn to before me t	his <u>6</u> day of <u>Septemb</u>	<u>er</u> , 2017.		
	Subscribed and swo	's ·.	and Da	b		
	Seal NOTARL		Notary Public in and for the	State of Idaho		
	Augusto		My Commission expires	1/1/2019		
	III OF I	18.5				
	ANE OF	Willia.				