

AFFIDAVIT OF CANDIDATE
CITY OF HIALEAH, FLORIDA

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF HIALEAH)

_____ (hereinafter "Affiant"), being first duly sworn,
deposes and says:

1. My name is _____.

2. **For those candidates seeking the office of Mayor**, please check the appropriate subsection (a) below. **For those candidates seeking the office of Council Member**, please check and fill in the blank in subsection (b) below:
 - (a) I am offering myself as a candidate for the office of Mayor of the City of Hialeah, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Hialeah for the duration of my term of office.

 - (b) I am offering myself as a candidate for the office of Councilmember, Group Number _____ of the City of Hialeah, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Hialeah for the duration of my term of office.

3. I am a registered voter and a duly qualified elector of the City of Hialeah, Florida, presently registered to vote in precinct number _____. (Hialeah Code § 5.05)

4. I have resided in the City of Hialeah for a minimum of one year prior to the primary election or election to which I intend to seek election. (Hialeah Code § 5.05 and §5.01)

I presently reside at the following address *(must include zip code)*:
_____,

which is my legal address, and I have resided continually at said address from the
_____ day of _____, _____ to the present.
 Month Year

5. Immediately prior to residing at the above stated address, I have resided at the herein below listed addresses for the cited periods of time:

INSTRUCTIONS: Please list all addresses at which you have resided at during the year prior to the primary election or election to which you intend to seek election.

Prior Addresses

Period of Time

6. At the present time, Affiant

- is
- is not

registered to vote in any city, county or state other than as stipulated in subparagraph 3 above.

INSTRUCTIONS: Please check “is” or “is not”

7. Affiant represents that he/she

- is
- is not

currently holding another elective or appointive office, whether state, district, county, or municipal public office, the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to Florida Statutes § 99.012.

INSTRUCTIONS: Please check “is” or “is not”

8. The address to the Affiant’s campaign headquarters is:

9. The telephone number to the Affiant’s campaign headquarters is _____.

10. Affiant’s telephone number is: _____.

11. Affiant’s e-mail address is: _____.

12. Affiant represents that, if elected, he/she shall serve in the elective office to which he/she seeks election.

SIGNED THIS _____ DAY OF _____, 2021.
Month

SIGNATURE OF THE AFFIANT

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ day of _____, 2021, by _____.

Signature of Notary Public - State of Florida

- Personally Known
OR
 Produced Identification

Type of Identification Produced

Print, Type, or Stamp Commissioned Name of Notary Public