

STATE OF ARIZONA
Legislative Write-In Candidate
NOMINATION PAPER
DECLARATION OF QUALIFICATION
A.R.S. §§ 16-311, 16-312

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of **State Representative - District No. 3**, for the **INDEPENDENT** Party, at the **2022 General Election** to be held on **Tuesday, November 8, 2022**.

I will have been a citizen of the United States for **58** years before my election and will have been a citizen of Arizona for **6** years before my election. I am **58** years old and my date of birth is **07/22/1964**, and therefore I will be at least 25 years of age upon taking said office. I have resided in the State of Arizona for **6** years, have resided in **Maricopa** County for **6** years, and I have resided in **Legislative District No. 3** for **6** years.

Residential Address:
PO Box 17178 Fountain Hills AZ 85269

Post Office Address:
None supplied.

Name in the exact manner you wish it to appear on the Notice of Write-In Candidates:

Skirbst

LAST NAME

John

FIRST NAME

I declare, under penalty of perjury, that the information in this Nomination Paper and Declaration of Qualification is true and correct, and that at the time of filing I am a resident of the district which I propose to represent, that I have no final, outstanding judgments against me of an aggregate of \$1,000 or more that arose from failure to comply with or enforcement of campaign finance law, and as to all other qualifications, I will be qualified at the time of election to hold that office that I seek. If running in the General Election, I further certify that I am not disqualified from running as a write-in candidate pursuant to A.R.S. § 16-312(F).

Friday, September 2, 2022
/S/ John Skirbst