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Town of Marana Clerk's Office

Nonpartisan Candidate NOMINATION PAPER DECLARATION OF QUALIFICATION A.R.S. §§ 16-311, 16-341

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of

Marcina Town Council at the	election to be held on the 30th	day of			
July , 20 24.					
I will have been a citizen of the United States for 69 years before my election and will have been a citizen of Arizona for 35 years before my election, and I will meet the Constitutional and/or statutory age requirement for taking said office. I have resided in County for 35 years and in precinct 242 for 35 years before my election.					
			Actual residence address	City or Town	Zip
or description of place of residence (required)					
Post office address (if applicable)	City or Town	Zip			
Print or type your name on the folk	owing line in the exact manner	you			
wish it to appear on the	e ballot, last name first.				
* 1	\mathcal{D}				
Ziegler,	Koxanne				
LAST-NAME	FIRST NAME				
I declare, under penalty of perjury, that the inf	formation in this Nomination Paper a	nd Declaration of			
Qualification is true and correct, and that at the time	e of filing I am a resident of the co	ounty, district, or			
precinct, 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 car					
will be qualified at the time of election to hold the office		or quamication of t			
	March 3	1/ 1/2 L			

DATE