



Office of the Minnesota Secretary of State
AFFIDAVIT OF CANDIDACY

Filing #
Cash/Check #
Amount \$

Instructions

All information on this form is available to the public. Information provided will be published on the Secretary of State's website. If filing for partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (Minn. Stat. 204B.03)

Candidate Information

Name and Office

Candidate Name (as it will appear on the ballot)
Office Sought
District #
For Partisan Office, Provide Political Party or Principle
For Judicial Office, Provide Name of Incumbent

Residence Address

Do not complete if residence address is to be private and checkbox below is marked. All address and contact information is optional for federal, judicial, county attorney, and county sheriff office candidates.

Street Address
City
State
Zip Code

My residence address is to be classified as private data. I certify a police report has been submitted or I have an order for protection for my (or my family's) safety, or my address is otherwise private by Minnesota law. I have attached a separate form listing my residence address.

Campaign Address and Contact

Candidate Phone Number (Required)
Campaign Contact Address (Required for those who have checked the box above):
Street Address
City
State
Zip Code
Website
Email

Affirmation

For all offices, I swear (or affirm) that this is my true name or the name by which I am generally known in the community.

If filing for a state or local office, I also swear (or affirm) that:

- I am eligible to vote in Minnesota;
I have not filed for the same or any other office at the upcoming primary or general election (except as provided in M.S. 204B.06, subd. 1 (2));
I am, or will be on assuming office, 21 years of age or more;
I will have maintained residence in this district for at least 30 days before the general election; and
If a major political party candidate, I either participated in the party's most recent precinct caucuses or intend to vote for a majority of that party's candidates at the next general election.

If filing for one of the following offices, I also swear (or affirm) that I meet the requirements listed below:

- United States Senator - I will be an inhabitant of this state when elected and I will be at least 30 years old and a citizen of the United States for not less than nine years on the next January 3rd, or if filled at special election, within 21 days after the election.
United States Representative - I will be an inhabitant of this state when elected and I will be at least 25 years old and a citizen of the United States for not less than seven years on the next January 3rd, or if filled at special election, within 21 days after the election.
Governor or Lieutenant Governor - I will be at least 25 years old on the first Monday of the next January and a resident of Minnesota for not less than one year on election day. I am filing jointly with
Supreme Court Justice, Court of Appeals Judge, District Court Judge, or County Attorney - I am learned in the law and licensed to practice law in Minnesota. My Minnesota attorney license number is and a copy of my license is attached.
State Senator or State Representative - I will be a resident of Minnesota not less than one year and of this district for six months on the day of the general or special election.
County Sheriff - I am a licensed peace officer in Minnesota. My Board of Peace Officer Standards and Training license number is and a copy of my license is attached.
School Board Member - I have not been convicted of an offense for which registration is required under Minn. Stat. 243.166.
County, Municipal, School District, or Special District Office - I meet any other qualifications for that office prescribed by law.

Candidate Signature Date

Subscribed and sworn to before me this day of, 20.

Notary public or other officer empowered to take and certify acknowledgement

(Notary stamp)

Office of the Minnesota Secretary of State

ADDRESS OF RESIDENCE FORM

Instructions

This form is to be attached to the Affidavit of Candidacy when a candidate has checked the Private Data box.

The address of residence is classified as private data at the request of the candidate. The address of residence is used by the filing officer who received the affidavit of candidacy, upon written request of a registered voter, to determine whether the address of residence listed by the candidate is actually located in the area represented by the office sought, pursuant to *Minnesota Statutes*, section 204B.06, subd. 1b (b). While the candidate is not required to provide the address of residence, failure to provide the address of residence will result in an incomplete affidavit of candidacy and the rejection of the affidavit of candidacy, which will result in the omission of the candidate's name from any ballot in the election for which the candidate attempts to file the affidavit of candidacy and pay the filing fee. This information will be available to the filing officer to whom the written request is delivered, to employees of that filing officer and to other elections officials with whom that filing officer consults in order to obtain information necessary to make the determination whether the address of residence listed by the candidate is actually located in the area represented by the office sought.

Candidate and Address of Residence

Candidate Name	<input type="text"/>		
Office Sought	<input type="text"/>		
Street Address	<input type="text"/>		
City	<input type="text"/>	MN	ZIP Code <input type="text"/>

Statement

Pursuant to *Minnesota Statutes* 204B.06, subd. 1b (c), I have requested that my address of residence be classified as private data. I certify that a police report has been submitted, or I have an order for protection regarding my safety or my family's safety.

Signature of candidate	<input type="text"/>	Date	<input type="text"/>
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CITY OF COON RAPIDS

Office of the City Clerk

11155 Robinson Drive

Coon Rapids MN 55433

Website: www.coonrapidsmn.gov

Email: clerk@coonrapidsmn.gov

Phone: 763-767-6493/Fax: 763-767-6531

Candidate Name Pronunciation Form

The AutoMARK ballot marking device is used in Minnesota precincts to assist individuals with disabilities to vote privately and independently. Users can choose to view their ballot and mark their choices on a touch screen, or they can listen to an audio version of their ballot and select candidates using a Braille keypad.

In order to ensure the accuracy of our audio ballot, we ask all candidates to provide the phonetic spelling of their name, as it appears on the Affidavit of Candidacy.

Name of Candidate: _____

Phonetic Spelling: _____

Office sought: _____

Date: _____

Office of the Minnesota Secretary of State

ELECTION CANDIDATE INFORMATION FORM (VOLUNTARY DISCLOSURE)

Instructions

Federal and State candidates are invited to complete this form in whole or in part. Submit it through the filing officer or by sending it to the Secretary of State via email (elections.dept@state.mn.us) or mail:

180 State Office Building, 100 Rev. Dr. Martin Luther King, Jr. Blvd., St. Paul, MN 55155-1299

Information submitted on this form will be published on the Secretary of State's web site. The Office of the Secretary of State does not edit the information submitted. Additional sheets will not be published.

Candidate Information

Candidate Name

Office Sought

Political Party or Principle

Address

Preferred mailing address (if different)

Telephone Fax

E-Mail Web site

Occupation and Employer Age

Current Office Held First Year Elected or Appointed

Previous Elected or Appointed Public Offices

Endorsements

Comments or Filing Statement (use this space only)

I certify that the information provided on this form is true.

Candidate Signature Date

Campaign Finance & Public Disclosure Board

190 Centennial Office Building, 658 Cedar St, St Paul, MN 55155

cfb.mn.gov



Statement of Economic Interest

Candidate for local official position in a metropolitan governmental unit
under Minn. Stat. § 10A.01, subd. 22; and 10A.09, subd. 6a

Filing instructions

(General instructions for completing the form are on page 2)

- Your statement is due at the governing body of the metropolitan governmental unit within 14 days after signing an affidavit of candidacy.
- This form may be filed by mail or fax sent to the metropolitan governmental unit.
- Address questions to the governing body of the metropolitan governmental unit.

Individual information	Employment information
Name	Occupation
Address at which you wish to receive mail from the metropolitan governmental unit (You may use either a home or business address.)	Name of employer - indicate if self-employed or not employed (include employer as a source of compensation on page 3)
City, state, zip	Business address
Telephone (daytime)	City, state, zip of business
Name of office	Email Address

Period covered

Original statement _____, _____
date filed for office

Certification

I, _____, certify that the information contained on this form, including
(print or type name) information on the schedules on page 3, is complete, true, and correct.

Signature of candidate or elected local official

Date

Notice: Any person who signs and certifies to be true a statement which the person knows contains false information or omits required information is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180; 800-657-3889; or through the Minnesota Relay Service at 800-627-3529.

General instructions

Occupation

Your occupation is your usual trade, profession, or employment. It includes categories such as homemaker and retired.

Reporting period

The reporting period begins on the first day of the calendar month before the date you filed your affidavit of candidacy and runs through the date that you filed.

Reporting sources of compensation

Based on the definitions below, list all businesses from which you received more than \$250 in compensation in any calendar month during the reporting period. Include any employer listed on page 1.

"Business" means an association, corporation, partnership, limited liability company, limited liability partnership, or other organized legal entity including a government agency. An individual acting alone in the individual's own capacity, such as in the form of a sole proprietorship, is not a business for purposes of this statement.

"Compensation" means any payment for labor or personal services as a director, officer, owner, member, partner, employer, or employee of a business. Compensation also includes payment of honoraria. Compensation does not include payments that do not result from the performance of services, such as rental income social security payments, unemployment compensation, workers' compensation, pension benefits, or insurance benefits.

Reporting business or professional activity categories

If you don't own 25% or more of a business or work as an independent contractor, leave this section blank.

If you own 25% or more of a business and received more than \$250 in any month during the reporting period as an employee of that business, list the business or professional activity category from page 4 that best describes the business' main function and check the "Employee" box.

Or, if you received more than \$2,500 in the past 12 months for work as an independent contractor, list the business or professional activity category from page 4 that best describes the nature of that work and check the "Independent Contractor" box.

Reporting securities

"Securities" means stocks, shares, bonds, warrants, options, pledges, notes, mortgages, annuities, debentures, leases, and commercial paper. "Securities" does not include mutual funds.

List all businesses in which you individually or jointly held securities valued at more than \$10,000 at any time in the reporting period. Use the definition of business in the compensation section above. For securities in a business, list the complete legal name of the business, not the business's stock market abbreviation. Do not list the value of the securities.

Include securities held in Individual Retirement Accounts, deferred compensation plans, 401(k) accounts, or similar plans. Do not include mutual funds or securities held in defined benefit pension plans.

Reporting real property

Do not report your homestead. Report interests in all other real property located in Minnesota that you held individually or jointly on the date you filed your affidavit of candidacy. You must report the following interests: a fee simple interest (you are an owner, even if you owe a mortgage), a mortgage that you hold as a seller, or a contract for deed as a buyer or seller.

Report an option to buy if the value of the option is more than \$2,500 or if the fair market value of the optioned property is more than \$50,000 even if the value of the option itself is \$2,500 or less.

For each property list the county in which the property is located. Also list the complete property address. The complete property address is the street address and city, or if the property does not have a street address, the section, township, and range where the property is located and the approximate acreage.

Waiver of reporting of second residence

Upon written request and for good cause shown, the Board may waive the requirement that a candidate disclose the address of real property that serves as a secondary residence of the candidate. Contact Board staff if you want to request this waiver.

Reporting pari-mutuel horseracing interests

Report any investment, ownership, or interest in property connected with pari-mutuel horse racing in the U.S. or Canada, including a race horse. Include any direct or indirect, partial or full interest held by you or an immediate family member.

Attach additional pages if necessary to complete any of these schedules.

Sources of compensation

----- Check each applicable box -----

Name of source	Director	Officer	Owner	Member	Partner	Employer	Employee	Honorarium

Business or professional activity categories

----- Check the applicable box -----

Business or professional activity category (See page 4)	Employee: \$250 in income in month and owns 25% or more of business	Independent contractor: More than \$2,500 in compensation

Securities

Name of business in which security is held	Name of business in which security is held

Real property

----- Check one -----

County	Street address and city; or section, township, and range	Own	Mortgage (Held as seller)	Contract for deed (As buyer or seller)	Option to buy - option worth more than \$2,500	Option to buy - property worth more than \$50,000	Acreage (if applicable)

Pari-mutuel horse racing

----- Check one -----

	Partial interest	Full interest	Description of interest (horse, stable, etc.)
Official direct interest			
Official indirect interest			
Family interest			

Business and professional activity categories

Use these categories for the business or professional activity category section on page 3. If you need more information to decide which category to use, please see the chart on the Internal Revenue Service website at <http://www.irs.gov/instructions/i1040sc/ch02.html#d0e1929>.

Accommodation
Administrative and Support Services
Agriculture, Forestry, Hunting, & Fishing
Agriculture & Forestry Support Activities
Amusement, Gambling, & Recreation Industries
Broadcasting (except Internet) & Telecommunications (including internet service providers)
Construction of Buildings
Construction - Heavy and Civil Engineering
Construction - Specialty Trade Contractors
Credit Intermediation & Related Activities
Data Processing Services (including internet publishing)
Educational Services
Food Services & Drinking Places
Health Care - Ambulatory Health Care Services
Health Care - Hospitals
Health Care - Nursing & Residential Care Facilities
Information (publishing industries except internet)
Insurance Agents, Brokers, & Related Activities
Manufacturing - Chemical
Manufacturing - Food
Manufacturing - Leather & Allied Product
Manufacturing - Nonmetallic Mineral Product
Manufacturing - Other
Mining
Motion Picture & Sound Recording
Museums, Historical Sites, & Similar Institutions
Performing Arts, Spectator Sports, & Related Industries
Personal & Laundry Services
Professional, Scientific, & Technical Services (Architectural, Engineering, & Related Services)
Professional, Scientific, & Technical Services (Computer Systems Design & Related Services)
Professional, Scientific, & Technical Services (Legal, Accounting, Payroll, & Tax Preparation Services)
Professional, Scientific, & Technical Services (Specialized Design Services)
Professional, Scientific, & Technical Services (Other)
Real Estate
Religious, Grantmaking, Civic, Professional, & Similar Organizations
Rental & Leasing Services
Repair & Maintenance Services
Retail - Building Material & Garden Equipment & Supplies Dealers
Retail - Clothing & Accessories Stores
Retail - Electronic & Appliance Stores
Retail - Food & Beverage Stores
Retail - Furniture & Home Furnishing Stores
Retail - Gasoline Stations
Retail - General Merchandise Stores
Retail - Health & Personal Care Stores
Retail - Motor Vehicle & Parts Dealers
Retail - Sporting Goods, Hobby, Book, & Music Stores
Retail - Miscellaneous Store Retailers
Retail - Nonstore Retailers
Securities, Commodity Contracts, & Other Financial Investments & Related Activities
Social Assistance
Transportation
Transportation (couriers and messengers)
Unclassified Establishments (unable to classify)
Utilities
Warehousing & Storage Facilities
Waste Management & Remediation Services
Wholesale Trade - Merchant Wholesalers - Durable Goods
Wholesale Trade - Merchant Wholesalers - Nondurable Goods
Wholesale Electronic Markets and Agents & Brokers