

Colorado Secretary of State  
Elections Division  
1700 Broadway, Ste. 270  
Denver, CO 80290  
Ph: (303) 894-2200 x 3  
Fax: (303) 869-4861  
www.sos.state.co.us



**CANDIDATE ACCEPTANCE OF  
DESIGNATION AND DECLARATION OF QUALIFICATION**  
[C.R.S. 1-4-601 & 1-4-1304]

**To the Honorable Bernie Buescher, Colorado Secretary of State:**

This is to certify that the undersigned accepts the nomination for the office listed and that I am qualified to hold said office upon election and that the following information is true and correct to the best of my belief and how I wish my name to appear on the official ballot:

Title of Office: \_\_\_\_\_ District: \_\_\_\_\_

Name of Candidate: \_\_\_\_\_  
**(WARNING: THIS IS HOW YOUR NAME WILL APPEAR ON THE BALLOT)**

Physical Address of Candidate: \_\_\_\_\_  
(Street/City/St/Zip)

Mailing address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Residence Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Party Affiliation: \_\_\_\_\_ Date of Affiliation: \_\_\_\_\_

County of Registration: \_\_\_\_\_ Precinct of Registration: \_\_\_\_\_

Date of Birth of Candidate: \_\_\_\_\_

Qualifications for Office: \_\_\_\_\_

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF COLORADO  
COUNTY OF \_\_\_\_\_

Before me, \_\_\_\_\_, a notary/officer duly authorized to administer oaths, in and for said State, personally appeared \_\_\_\_\_, whose name is subscribed to the foregoing Candidate Affidavit, and who affirms, that said statements are true and that he/she acknowledges the execution of said instrument to be of their own free act and voluntary deed for the uses and purposes therein set forth.

Subscribed and affirmed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

(Seal) \_\_\_\_\_  
(Notary/Official Signature)

\_\_\_\_\_  
(Commission Expires)