

**AFFIDAVIT OF INTENT TO BE A WRITE-IN CANDIDATE**

C.R.S. 1-13.5-305; 1-4-1101; 1-4-1102(2); 1-4-501; 1-45-109(1)(II); 1-45-110; SOS CPF Rule 16

I, \_\_\_\_\_  
(full name of the candidate)

who reside at: \_\_\_\_\_  
(Residence Street Name and Number)

\_\_\_\_\_  
(City or Town, Zip Code)

\_\_\_\_\_  
(County, State)

\_\_\_\_\_  
(Mailing Address, if different from residence address)

whose email address is: \_\_\_\_\_  
(Email Address)

whose telephone number is: \_\_\_\_\_  
(XXX) XXX - XXXX

**desire the office of** Director for **four-year (4)** term on the Board of Directors of the Trinidad Ambulance District at the regular election on May 2, 2023, **and am qualified to assume the duties of the office if elected and will serve as Director if elected.**

I am an eligible elector because I am registered to vote in Colorado and am (mark one):

A resident of the District, or area to be included in the district; or

The owner (or spouse/civil union partner of owner) of taxable real or personal property situated within the boundaries of the District, Spouse's Name, if property is in spouse's name:

A person who is obligated to pay taxes under a contract to purchase taxable property within the District.

**I further affirm that I am familiar with the provisions of the Fair Campaign Practices Act as required in § 1-45-110 of the Colorado Revised Statutes, I will not, in my campaign for this office, receive contributions or make expenditures exceeding \$200 in the aggregate during the election cycle, however, if I do so, I will thereafter file all disclosure reports required under the fair campaign practices act.**

**DATED** this \_\_\_\_ day of \_\_\_\_\_, 2023.

**WITNESSED** by the following registered elector:

\_\_\_\_\_  
(Signature of Candidate)

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Printed Full Name of Candidate)

\_\_\_\_\_  
(Printed Full Name of Witness)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(City or Town, Zip Code)

Before me, \_\_\_\_\_, a notary/officer duly authorized to administer oaths, in and for said State, personally appeared \_\_\_\_\_, whose name is subscribed to the forgoing Affidavit of Intent to Be A Write-In Candidate, and who being first duly sworn, upon oath says, that the foregoing statements are true and he/she acknowledges the execution of said instrument to be of his/her own free act and voluntary deed for the uses and purposes therein set forth.

Subscribed and affirmed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

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

Seal

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

My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
(Title)

**For Use by the Designated Election Official**

Received on: \_\_\_\_\_ (Date), at: \_\_\_\_\_(Time) Received by: \_\_\_\_\_(Name)  
County in which the district court that authorized the creation of the special district is located: **Las Animas County**.

Copy sent to Secretary of State on: \_\_\_\_\_ (Date) [no later than 60 days before election only if election will not be cancelled]

**PROCEDURAL INSTRUCTIONS:** This is a sample form only. Review use with attorney. The Affidavit of Intent shall be filed by the close of business on the sixty-fourth day before the election. The DEO will prepare a list of the names of the individuals who filed the affidavit of intent for use by the judges at the polling place.

**\*\*\*ATTENTION: DO NOT FILE WITH THE SECRETARY OF STATE IF YOUR ELECTION IS CANCELLED!**