



## 2016 Candidate Information

**The following dates are in accordance with Minnesota Statutes:**

Candidate filing opens on Tuesday, August 2, 2016

Candidate filing closes on Tuesday, August 16, 2016 at 5:00 p.m.

Withdrawal deadline is Thursday, August 18, 2016 at 5:00 p.m.

Terms begin on January 10, 2016.

Term for Special Election City Council seat begins upon receipt of Certificate of Election.

**The following are elective offices for the City of Mound, which will appear on the November 8, 2016 General Election ballot.**

### MAYOR

<b>Term</b>	Two Years
<b>Salary</b>	\$375.00/month

### COUNCILMEMBER (Two Positions)

<b>Term</b>	Four Years
<b>Salary</b>	\$250.00/month

### **Eligibility to Hold Office**

Article VII, Section 6 of the Constitution of the State of Minnesota: Every person who by the provisions of this article is entitled to vote at any election and is twenty-one (21) years of age is eligible for any office elective by the people in the district wherein he has resided thirty days previous to the election, except as otherwise provided in the Constitution and law of the United States.

### **Items to be Filed at the City Clerk's Office**

Affidavit of Candidacy  
Election Candidate Information Form (Voluntary)  
\$2.00 Filing Fee

**Contact Information:** Kevin Kelly, Administrative Services Coordinator at 952-472-0613 or via email at [asc@cityofmound.com](mailto:asc@cityofmound.com)



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

Office Sought

Street Address

City

MN ZIP Code

**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

Date

# CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information)

Name of candidate, committee or corporation \_\_\_\_\_

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

Type of report \_\_\_\_\_ Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report

Period of time covered by report:  
 from \_\_\_\_\_ to \_\_\_\_\_

## CONTRIBUTIONS RECEIVED

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH	\$ _____	TOTAL CASH-ON-HAND	\$ _____
IN-KIND	+ \$ _____		
TOTAL AMOUNT RECEIVED	= \$ _____		

## DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
<b>TOTAL</b>		

## CORPORATE PROJECT EXPENDITURES

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.

Project title or description \_\_\_\_\_

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
<b>TOTAL</b>			

I certify that this is a full and true statement. \_\_\_\_\_

Signature

Date

Printed Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email (if available) \_\_\_\_\_

Address \_\_\_\_\_

Report

Office

For Office Use Only: Name

## CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

### Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (Minnesota Statutes 211A.05, subdivision 1).

### Campaign Information

Name of candidate or committee \_\_\_\_\_

Office sought by candidate (if applicable) \_\_\_\_\_

Identification of ballot question (if applicable) \_\_\_\_\_

### Certification

Select the appropriate choice below, and sign:

I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer \_\_\_\_\_

Date \_\_\_\_\_