



AUTHORIZATION TO PICK-UP AND/OR DROP-OFF CANDIDATE FILING DOCUMENTS

NOVEMBER 3, 2020 GENERAL MUNICIPAL ELECTION

Candidate Name (As registered to vote):	
Office Sought:	
Residence Address:	
Mailing Address (If different):	
Day Phone Number:	
Evening Phone Number:	
E-Mail Address:	

I authorize the following person to act as my representative to obtain and/or return the necessary forms for my candidacy to the above-referenced office:

Name:	
Phone Number:	

Filing Period July 13 through August 7, 2020 at 5:00 p.m.

I am aware of the filing dates and that all required forms must be completed and received at the same time, in person by the City Clerk's Office no later than 5:00 p.m. on the deadline date.

Candidate Signature

Date