

**CITY OF GAINESVILLE  
AFFIDAVIT OF RESIDENCY**

RECEIVED OCT 13 2017

**STATE OF FLORIDA**


**COUNTY OF ALACHUA**

I, the undersigned candidate for City Commission,  
(Specify Office & District Number, if applicable)

do hereby certify that I have been a qualified voter who is a resident of the City of  
Gainesville, Florida, District 1 for at least six months prior to  
(add District Number, if applicable)

the date I filed qualifying papers with the Supervisor of Elections for the office I seek.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING  
AFFIDAVIT AND THAT THE FACTS STATED IN IT ARE TRUE.**

  
\_\_\_\_\_  
Signature of Candidate

Tyra F. Edwards  
\_\_\_\_\_  
Print Name

10/13/2017  
\_\_\_\_\_  
Date