

CITY OF GAINESVILLE
AFFIDAVIT OF RESIDENCY

CITY OF GAINESVILLE
CITY COMMISSION

2019 FEB -1 AM 9:30

STATE OF FLORIDA

COUNTY OF ALACHUA

I, the undersigned candidate for Mayor At-Large,
(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, _____ 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

MARLON C. BRUCE

Print Name

12/15/2018

Date