

**CITY OF GAINESVILLE  
AFFIDAVIT OF RESIDENCY**

CITY OF GAINESVILLE  
CITY COMMISSION

19 DEC 12 AM 9:32

STATE OF FLORIDA

COUNTY OF ALACHUA

I, the undersigned candidate for Gainesville (PR) City Commission At Large <sup>Seat 2</sup>,  
(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, (PR) At Large <sup>Seat 2</sup> for at least six months prior to  
(add District Number, if applicable)

the date I filed qualifying papers with the Office of the Clerk of the Commission 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.**

*P Rhodenizer*

Signature of Candidate

*Paul Rhodenizer*

Print Name

*12/12/19*

Date