

**CITY OF GAINESVILLE
AFFIDAVIT OF RESIDENCY**

REC'D CLERK'S OFFICE
'21 JAN 27 PM 1:46

STATE OF FLORIDA

COUNTY OF ALACHUA

I, the undersigned candidate for Gainesville City Commissioner, D1
(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 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.**

Gigi Simon
Signature of Candidate

Gigi Simon
Print Name

1-27-21
Date