## **CITY OF GAINESVILLE AFFIDAVIT OF RESIDENCY**

REC'D CLERK'S OFFICE '22 JUN 16 PM4:50

## **STATE OF FLORIDA**

## **COUNTY OF ALACHUA**

Grandoille De Jon-16 2020
I, the undersigned candidate for <u>City Common District</u> , (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 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.
Signature of Candidate
DIJLON LAMUR CUIN Print Name
06/16/2022

**Date**