## City of Parker

## Affidavit of Residency





STATE OF FLORIDA COUNTY OF BAY

I, ANDREW M. KELLY (Print Name)	, being duly sworn, depose
and say that I hereby declare and assert my candida	acy for the office of
(Print Office sought and Ward Number if appli	for the City of Parker, Florida.
I further depose and say that I am legally qualified t	to be a candidate for election to the Office
of	and that I am a registered voter, who icable)
is legally eligible to vote in City Elections. I also de	epose and say that I have resided not less than
three continuous months immediately preceding the	first official date to qualify for elective
office in the City of Parker at:  (Print	Street Address)
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