Candidate Qualifying Checklist

Candidate's Name:		ichael	Oftair	RECEIVE
Office Sought:	Forrest	Creek	CDD,	2822 JUNA DPM 2: 15
				HERVISOR OF ELECTIONS
Qualifying Fee (Unles	s qualifying by the pet	ition method):		
☐ Check☐ Check☐ Amou☐ Writte☐ Check	drawn on bank design at is not less than the and numerical numb is signed by treasurer	account (Unless S nated on Form Da qualifying fee pers are both fille or by deputy trea	S-DE 9 d in and are the s asurer	
Appointment of Camp	oaign Treasurer (Form	DSDE 9) (Do no	t file again if prev	vious filing is correct)
Party a Campa Candio Campa Campa Campa	provided — must inclustifiliation provided, if a sign treasurer designately depository designately date original signature date indicated date signign treasurer's acceptaign treasurer indicated date sign treasurer indicate	applicable ted ed ned ance of appointn ure provided		et, if applicable
Financial Disclosure I	iled (Form 6 or Form	1 whichever appr	opriate)	
☐ 2019 f ☐ Candid ☐ Venue ☐ Date o ☐ Persor ☐ Contai		ded ere oath was take d ication provided : nted below signa	n) s indicated ture	·
Candidate Oath Filed (DS-DE 30)	- Original (SL, DS-DE 302NP, DS-1	DE 303JU, or DS-D	E 304SB whicheve	r appropriate)
☐ Office ☐ Count ☐ Under ☐ Candid☐ Venue ☐ Date o ☐ Person ☐ Contai	provided (must incluy of legal residence Statement of Party, plate signature provided (county when the following the statement of the signature provided (county when the statement of the statem	arty affiliation process of the control of the cont	ce including distortion ovided (if application) ed commission not	