

**SUNBURST FARMS IRRIGATION DISTRICT
Nomination Petition**

I hereby petition the name of _____, who resides at _____, Maricopa County, Arizona, to be placed on the ballot as candidate for the office of Director, Sunburst Farms Irrigation District for the election to be held November 14, 2017. The Director elected, upon qualifying, shall hold office for a three-(3) year term beginning January 1, 2018 & ending December 31, 2020. I hereby certify that I am a qualified elector in accordance with ARS 48-2917 & ARS 48-3015.

- An Elector must: 1) be a holder of title or evidence of title for 90 days immediately preceding date of the election
 2) Reside in Maricopa County continuously for 6 months immediately preceding the election
 3) Be at least 18 years of age 4) be registered as provided by ARS48-3015

Lot #	Name (Print)	Signature	Street Address	City	Date
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STATE OF ARIZONA)
) ss:
County of Maricopa)

AFFIDAVIT OF CIRCULATOR

I, (*Print Name*) _____, a qualified elector in the county of Maricopa, State of Arizona, at all times during my circulation of this nomination petition, and under the penalty of a class 1 misdemeanor, depose and say that each individual signed this sheet of the forgoing Petition in my presence on the date indicated, and I believe that each signer's name and residence address or post office address are correctly stated and that each signer is a qualified elector of the state of Arizona, and that I and all signers of this petition are qualified to vote in the election.

(Signature of affiance) _____
(Residence address, street and number of affiance or if
no street address, a description of residence location) _____

(County of registration) _____

(If registered at a different address at any time during
circulation of this sheet, former address of affiance) _____

Subscribed and sworn before me this _____ day of _____ 2017

Notary Public

Arizona