

Rec'd by City Clerk 1-22-19

CANDIDATE AFFIDAVIT

Office Sought: Mayor OR Councilmember in District _____ Election: April 2, 2019

Candidate Information

Full Legal Name

Wade Oakes Troxell

Name exactly as it should appear on the City's web site

Wade Troxell

Residential Address (including city/state/zip) Mailing Address (if different)

812 Rachelle Circle
Fort Collins, Co
80526

Telephone Number (primary) E-mail Address

970-217-0465 VoteForWade@Comcast.net

Campaign Web Site

VoteForWade.org

Certification

Pursuant to Section 7-133 of the Fort Collins City Code, I certify that I am familiar with the provisions of Article V of Chapter 7 of the City Code.

Signature of Candidate Date of Signing

[Signature] 1/21/19

STATE OF COLORADO)
) ss.
COUNTY OF LARIMER)

Before me, Cynthia L Skiff, a notary/officer duly authorized to administer oaths, in and for said State, personally appeared Wade Troxell whose name is subscribed to the foregoing Candidate Affidavit, and who affirms that said statements are true and that he/she acknowledges the execution of said instrument to be of his or her own free act and voluntary deed for the uses and purposes therein set forth.

Subscribed and sworn to before me this 21 day of January, 2019.



[Signature]
Notary Public