AUTHORIZATION FOR CANDIDATE'S REPRESENTATIVE
General Municipal Election
Election Date: November 3, 2026

Candidate's Name:
As registered to vote: _____

Residence Address: _____

_____

Business Address: _____

_____

Mailing Address: _____
(If different)

_____

Contact Info: ( ) _____ ( ) _____
Day Telephone Evening Telephone

( ) _____ _____
FAX E-Mail

Office Sought:
District Name: _____

District or Office Number: _____
(If applicable)

I authorize the following person(s) to act as my representative to obtain the necessary forms for my candidacy to the above-referenced office:

_____

_____

I am aware of the filing dates. The forms must be completed and received by the City Clerk no later than close of business (5:00 p.m.) on the deadline date.

(A postmark is **<u>not</u> acceptable**)

Filing Dates:

Nomination Period----------July 13, 2026 to August 7, 2026
Write-in Filing Period----------September 7, 2026 to October 20, 2026

_____ _____
Date **Candidate's Signature**