



Affidavit of Candidacy

Information on this affidavit is public data unless noted as private. See the reverse side for more filing information.

Filing # 6 Fee Amount \$ 50.00
 Circle payment method:
 Cash | Card | Petition | Check # _____
 Viewed ID or proof of residence
 Reviewed affidavit for completeness

Candidate Information

Candidate name as it will appear on the ballot Benjamin Zastrow
Clearly write or type in mixed upper- and lower-case | Include punctuation and accents | No professional titles

Candidate name pronunciation sounds like _____
If left blank, the accessible ballot marking device's default pronunciation of your name will be used

Office sought Mayor District /Seat number if applicable _____

Contact Information

Email non-government electbenjaminzastrow@gmail.com Check box if you do not have email
 Phone number 608-622-6093 If you check both this box and the private box below, you must provide an address in Campaign Contact

Residence Address

REMAIN PRIVATE Both boxes must be checked **OR** **NOT PRIVATE** Must provide if boxes to the left are not checked

- I request that my residence address be classified as private data.
- I have completed the Address of Residence Form on the next page.

Residence street address _____
 City _____
 State _____ Zip code _____

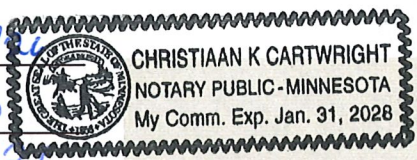
Campaign Contact

Campaign address Optional unless private boxes checked and no email provided P.O. Box 158
 City Rochester State MN Zip code 55903
 Campaign website Optional electbenjaminzastrow.com can be updated with filing officer any time

Affirmation & Signature I swear (or affirm):

- This is my true name or the name by which I am generally known in the community.
- I am eligible to vote in Minnesota.
- I have not filed for the same or any other office at the upcoming primary or general election (unless authorized by Minn. Stat. 204B.06, subd. 9).
- I am, or will be on assuming office, 21 years of age or more.
- I will have maintained residence in this district for at least 30 days before the general election.
- I have provided valid identification or documentation of proof of residence authorized in Minn. Stat. 204B.06, subd. 1b that matches the residence address information provided on this affidavit or on a separate form, if address is classified as private data.
- I have provided my phonetic name pronunciation above or I certify that I am directing the official responsible for programming materials for the election to use the applicable technology's default pronunciation of my name.
- If filing for School Board Member: I also swear (or affirm) I have not been convicted of an offense for which registration is required under Minn. Stat. 243.166.
- I meet any other qualifications for this office prescribed by law.

Candidate signature [Signature] Date 5/19/20
 Signature of notary public or other officer empowered to take and certify acknowledgment Christiaan K. Cartwright
 Subscribed and sworn to before me this 19 day of MAY, 20 20



Notary stamp