



Office of the City Clerk
P.O. Box 1293 Albuquerque, NM 87103
Phone (505) 924-3650
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www.cabq.gov/clerk

Designation of Representatives

I, _____, a Candidate for City Council, District: _____ in the 2023 Regular Local Election, hereby designate the following individuals as representatives for my campaign. They are authorized to receive training from the City Clerk's Office, to submit or pick up materials from the City Clerk's Office regarding my candidacy, or to generally correspond with the City Clerk's Office on my behalf.

I acknowledge that the individuals listed below are representatives for my campaign and I accept full responsibility for the statements they make and for the materials they submit on behalf of my campaign.

- | | | |
|-----|----------------------------------|---|
| (1) | _____
Name of Representative | _____
Title of Representative |
| | _____
Email of Representative | _____
Phone Number of Representative |
| (2) | _____
Name of Representative | _____
Title of Representative |
| | _____
Email of Representative | _____
Phone Number of Representative |
| (3) | _____
Name of Representative | _____
Title of Representative |
| | _____
Email of Representative | _____
Phone Number of Representative |

I, _____, hereby swear or affirm, under penalty of perjury under the laws of the State of New Mexico, that all the information on the uploaded form and on any attachments is true, correct, and complete, to the best of my knowledge.

Candidate Signature

Date