

CANDIDATE PETITION

Notes: - All information on this form becomes a public record upon receipt by the Supervisor of Elections.
- It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, Florida Statutes]
- If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.

I, _____ the undersigned, a registered voter
(print name as it appears on your voter information card)

in said state and county, petition to have the name of **MARLON HILL**

placed on the Primary/General Election Ballot as a: [check/complete box, as applicable]

☒ Nonpartisan ☐ No party affiliation ☐ _____ Party candidate for the office of

Miami-Dade County Commissioner, District 9

(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth or Voter Registration Number
(MM/DD/YY)

Address

City

County **Miami-Dade**

State **FL**

Zip
Code

Email
Address

Cell
Number

Signature of Voter

Date Signed
(MM/DD/YY)

[to be completed by Voter]



Please cut here

Please print and complete the above
Qualifying Petition (make sure to sign and date),
put it in an envelope and mail it to:

Marlon Hill Campaign
P.O Box 160817
Miami, FL 33116-9979