

AFFIDAVIT OF FINANCIAL HARDSHIP
(Section 16-7, Miami City Code)

I, _____, a candidate for the office of _____ do hereby certify, pursuant to Section 16-7, Miami City Code, that I am unable to pay the \$100 City of Miami qualifying fee required per Section 16-6, Miami City Code, to qualify as a candidate for elected office because paying the qualifying fee would be an undue burden on my personal financial resources or on the financial resources available to me.

I SWEAR OR AFFIRM THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Date

Signature of Candidate

Address: _____

City: _____ State: _____ Zip: _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____,

20_____ by _____.

Signature of Notary Public

Name of Notary Typed, Printed or Stamped

Personally Known: _____ OR Produced Identification: _____

Type of Identification Produced: _____

FOR OFFICE USE ONLY: