

Candidate Statement of Interest A.R.S. § 16-311; A.R.S. § 16-341(I)

You are hereby notified that I, the under for the office of: Mayor City Councilmember (4-year term) City Councilmember (2-year term) in the City of Prescott, AZ at the Primar			
<u>Candidate Information</u> (Print your information.)			
Name: LEFKOWITZ	MA	MARC First	
Last	Fi		
Residence Address:			
	Street		
PRESCOTT	A2	863	603
City	State	Zip Co	ode
Mailing Address: SAME			
Maning Address.	Street		
City	State	Zip Code	
Primary Phone:	Type of Phone: Home	Work	Cell
Alternate Phone: () -	Type of Phone: Home	Work	Cell
Primary Email:	•		
Alternate Email:			
By submitting this document, I understant the date of this Statement of Interest are § 16-351. I understand this Statement is the nomination paper is the formal notif	invalid and may be subject to is not a formal declaration of ication for seeking municipal	challenge p candidacy office.	ursuant to A.R.S.
I no	3 3	123	
Candidate Signature	Date		