Affidavit	t of Identity and Receipt of Filing	Attidevir of identity and flocetpt of filing
candidate information	First hame  first hame  18755 Glenwood Blvd.  residential address  mailing address, if applicable	Miller last Lathrup Village, M, 48076 city/zip
additional information	(2(8) 515-8653  phone number  Kare 156@aol.com  email address	date of birth  campaign website
office sought/ ballot information	The state of the s	Village, mi district / circuit / ward
filer's acknowledg- ment (check one)	nominating or qualifying petitions (estimated number of signatures 36) to be destroyed returned in January  a filing fee of \$100 (if applicable)  certification of party nomination and certificate of acceptance (if applicable)  judicial candidates only: affidavit of constitutional qualification affidavit of candidacy (incumbents only)	
statements and attestation	I am a citizen of the United States and I meet the statutory and constituents, or affirm, that the facts I have provided and the facts contained At this date, all statements, reports, late filing fees, and fines due support my election to office under the Michigan Campaign Final I acknowledge that making a false statement in this affidavit is perjury for up to 5 years, or both and may result in disqualification from the ball notary signature    March   17th   day of   July notary public, state of Michigan, county of   Wayne acting in the county of OMMANUTED COMMANUTED COMMANUT	in the statement set forth below are true.  e from me or any Candidate Committee organized to nce Act, PA 388 of 1976, have been filed or paid.  a felony punishable by a fine up to \$1,000.00 or imprisonment
for office use only	received by number of pet	date of filing  campaign finance number

## **RECEIPT OF NOMINATING PETITIONS FILED**

To: Kaker Miller	Date
To: Kaker Miller 18755 Glenwrod Blod	
This will acknowledge receipt of your nominating petition  thy Charles Member, as a, as a, as a	ns for the office of  Now-party SPM candidate  (NON-PARTISAN)
Attached hereto:	
2 Affidavit of Identity (check)	
1 Affidavit – Name change (check)	
_	Kilda Wonda
	AUTHORIZED SIGNATURE
I agree that the foregoing is a correct count of the r	number of petition sheets submitted by me.
My count of the individual signatures was36	
Ido/do not request that my petitions be returned to me	e after January 1 next following the election.
(248) 575-86 13 PHONE NO.	Garena Miller CANDIDATE'S SIGNATURE
WITHDRAWAL NO	OTICE .
(To be submitted no later than – 3rd day following)	
(Last day for filing petitions – 4:00 P.M. – E.S.T.)	
	20
Please take notice that I have this day requested you	
for the office of	
as a candidate.  (NAME OF PARTY) (NON-PARTISAN)	
ACKNOWLEDGED:	
	CANDIDATE'S SIGNATURE