Office of the Minnesota Secretary of State

Filing # 74 Amended
Cash/Check #
Amount $

Affidavit of Candidacy

Don Samuels

All information on this form is available to the public. Information provided will appear on the Secretary of State's website at www.sos.state.mn.us.
Note: If filing for partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (M.S. 204B.03).

Please print or type.

Name (as it will appear on the ballot): DON SAMUELS
Office Sought: MAYOR District #: CITY-WIDE
For Partisan Office Provide Political Party or Principle: DEMOCRATIC - FARMER - LABOR
For Judicial Office Provide Name of Incumbent:

Note: All address and contact information is optional for federal, judicial, county attorney and county sheriff office candidates.
Candidate Residence Address (Do not complete if residence address is to be private and checkbox below is marked)

Street Address: 1542 HILLSIDE AVE. N
City: MINNEAPOLIS State: MN Zip: 55411

☐ **My residence address is to be classified as private data.** I certify a police report has been submitted, or I have an order for protection regarding my safety or my family's safety, and I have attached a separate form listing my residence address.

Candidate Phone Number (Required): (612) 588-9008

Campaign Contact Address (Required for those who have checked the box above)

Street Address: 201 WEST BROADWAY AVE N.
City: MINNEAPOLIS State: MN Zip: 55411
Website: SAMUELSFORMAYOR.COM **Email:** DONSAMUELS49@GMAIL.COM

For all offices, I swear (or affirm) that this is my true name or the name by which I am generally known in the community.
If filing for a state or local office, I also swear (or affirm) that:

- I am eligible to vote in Minnesota;
- I have not filed for the same or any other office at the upcoming primary or general election;
- I am, or will be on assuming office, 21 years of age or more;
- I will have maintained residence in this district for at least 30 days before the general election; and
- If a major political party candidate, I either participated in the party's most recent precinct caucuses or intend to vote for a majority of that party's candidates at the next general election.

If filing for one of the following offices, I also swear (or affirm) that I meet the requirements listed below:

- **United States Senator** - I will be an inhabitant of this state when elected and I will be at least 30 years old and a citizen of the United States for not less than nine years on the next January 3rd, or if filled at special election, within 21 days after the election.
- **United States Representative** - I will be an inhabitant of this state when elected and I will be at least 25 years old and a citizen of the United States for not less than seven years on the next January 3rd, or if filled at special election, within 21 days after the election.
- **Governor or Lieutenant Governor** - I will be at least 25 years old on the first Monday of the next January and a resident of Minnesota for not less than one year on election day. I am filing jointly with _____.
- **Supreme Court Justice, Court of Appeals Judge, District Court Judge, or County Attorney** - I am learned in the law and licensed to practice law in Minnesota. My Minnesota attorney license number is _____ and a copy of my license is attached.
- **State Senator or State Representative** - I will be a resident of Minnesota not less than one year and of this district for six months on the day of the general or special election.
- **County Sheriff** - I am a licensed peace officer in Minnesota. My Board of Peace Officer Standards and Training license number is _____ and a copy of my license is attached.
- **School Board Member** - I have not been convicted of an offense for which registration is required under Minnesota Statutes, section 243.166.
- **County, Municipal, School District, or Special District Office** - I meet any other qualifications for that office prescribed by law.

Candidate Signature

8/13/13
Date

DANITA JEAN CONNORS-SMITH
Notary Public
Minnesota
My Commission Expires January 31, 2015
(Notary stamp)

Subscribed and sworn before me this 13 day of August 2013.
Danita Connors-Smith
Notary public or other officer empowered to take and certify acknowledgments.

Rev. 4-12

white copy – Filing Officer yellow copy – CFPD Board goldenrod copy – Candidate pink copy – Public Information

Office of the Minnesota Secretary of State

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DON SAMUELS

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Please print or type.

Name (as it will appear on the ballot): DON SAMUELS
Office Sought: MAYOR District #: MINNEAPOLIS
For Partisan Office Provide Political Party or Principle: DEMOCRATIC - FARMER - LABOR
For Judicial Office Provide Name of Incumbent: R.T RYBAK

Note: All address and contact information is optional for judicial, county attorney and county sheriff office candidates.
Candidate Residence Address (Do not complete if residence address is to be private and checkbox below is marked)
Street Address: 1542 HILLSIDE AVE. N
City: MINNEAPOLIS State: MN Zip: 55411

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Website: SAMUELSFORMAYOR.COM **Email:** DONSAMUELS49@GMAIL.COM

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- **United States Representative** - I will be an inhabitant of this state when elected and I will be at least 25 years old and a citizen of the United States for not less than seven years on the next January 3rd, or if filled at special election, within 21 days after the election.
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- **County, Municipal, School District, or Special District Office** - I meet any other qualifications for that office prescribed by law.

Candidate Signature

8/12/13
Date

GRACE WACHLAROWICZ
Notary Public
MINNESOTA
My Commission Expires January 31, 2015
(Notary Stamp)

Subscribed and sworn before me this 12 day of August 2013.

Notary public or other officer empowered to take and certify acknowledgments.

white copy – Filing Officer | yellow copy – CFPD Board | goldenrod copy – Candidate | pink copy – Public Information

Rev. 5-10