

BOISE CITY REC'D CITY SLERK

CANDIDATE FILING PERIOD (I.C. 50-410)	OFFICE INFORMATION	2021 AUG 27 PM 1: 51					
Opens: August 23, 2021 (8:00 am)	Filing for the Office of	Seat 1					
Closes: September 3, 2021 (5:00 pm)	Filing for the Office of:	City Council, District					
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34-1405A)							
September 17, 2021 (5:00 pm)	City Name:	Boise					
CANDIDATE INFORMATION							
Candidate Name (As it will appear on the ballot.)							
Luci WILLits							
This petition must be filed in the office of the appropriate city clerk with the Declaration of Candidacy on or before 5:00 p.m. on the last day of filing for the Election at which you are desiring to participate in. The submitted petition must have affixed thereto the names of at least five (5) qualified electors which reside within the city.							
SIGNERS STATEMENT							
I, the undersigned, being a qualified elector of the city listed above in the State of Idaho, do hereby certify and declare that I reside at the place set opposite my name, and that I join in the petition of the candidate for the office listed above, to be voted for at the election to be held on the day of, 2021, and that each for himself says: I have personally signed this petition; I am a qualified elector of the State of Idaho and my residence address is correctly written after my name.							
Signature of Petitioner Printed Name	Residence Address	Date Signed					
1) The Holy Tyles Holly	11275 W. Hia	7 - 1 - 1					
V2 Telan IVII		CKony Rise Dr. 8-24-21					
3. John Con	100 No Hic	kong Run Ave 3-24-21					
1 7 1 290		korg Run Ave 8-24-21					
5. C. H.T.	1 /1	1 (1)					
A TO DEIGH THE MICKOT Kun ALL 1/21/2021							
7. Sull W. Guff Ruth Crawford 11311 W. HICKORY RISE DR 8/24/2021							
CERTIFICATION							
State of Idaho County of Ada							
I, Lucinde Liby H., being first duly sworn say: That I am a resident of the State of Idaho and at least eighteen (18) years of age: that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence: I believe that each has stated his or her name address and residence correctly, that each signer is a qualified elector of the State of Idaho, and a resident of the county of							
Circulator Signature: Zuandawo	Address:	. Hekory Durr PI Buss, LOSS.					
Subscribed and sworn to before me this 25 day of	ngust 2021	300.0					
Notary Signature: A MACA A COSTA							
Notary Public in and for the State of Idaho, residing at	r Lucinda Willits	NOTARY PUBLIC STATE OF IDAHO					
Boise Idaho	(only)	COMM. NO. 20204744					
My Commission Expires: 12/04/7076							



CANDIDATE FILING PERIOD (I.C. 50-410)		OFFICE INFORMAT	ION					
Opens: August 23, 2021 (8:00 am)		OF FIGE IN ORMATI	OFFICE INFORMATION			Sector		
Closes: September 3, 2021 (5:00 pm)		Filing for the Off	ice of:	City Coursel Delect				
CANDIDATE WITHDRAWAL DEADLINES (I.C. 34	-1405A)) Council, Dismer!				
September 17, 2021 (5:00 pm)		City Name:		City Council, District 1 Boise				
CANDIDATE INFORMATION								
Candidate Name (As it appears on your voter regis	tration re	ecord.)						
First	МІ	Last		***************************************		Suffix		
Lucinda	B	Willita						
Residence Address (As it appears on your voter registration record.)								
Street Address	City		State	Zip Cod	le	County		
5403 N. Hickory Burr	PI '	Boise	DO	8:	3713	Ada		
Mailing Address								
Street Address	City		State	Zip Cod	le	County		
S403 N. Hickory Burgt	1 /3	Boise	DV) 13	713	Ada		
J			ere a constant			·*·		
BALLOT NAME								
Write your name exactly as you would like it to appear on the ballot								
Luci Willits								
CAMPAIGN FINANCE INFORMATION								
I do hereby certify that I am a registered elector	of the St	ate of Idaho and appoin	t myself	as treasurer	for my cam	paign. If any campaign		
finance contributions or expenditures reach or exceed \$500, I will create a Campaign Finance account with the Secretary of State, and may								
at that time, appoint another person as Treasurer or remain as my own Treasurer.								
CERTIFICATION								
I, the undersigned, being a resident of the State of Idaho and of the city listed above, do hereby declare myself a candidate for the office entered above to be voted on at the Election to be held on the day of, 2021 and I certify that the information on this Declaration is true and accurate.								
I further certify that I possess the legal qualifications to hold said office. I submit herewith the filing fee of (\$40.00), or in lieu of the filing fee the								
nominating petition containing the five (5) signatures of qualified electors as statutorily required. Dated: Candidate Signature:								
Dated: Lucinde (U) 5-8-25-21 Candidate Signature:								
Subscribed and sworn to before me this 25 da	y of 🕺	uanst 20	21					
Signature: August Chesti ELIZABETH ARESTI								
for Lucinda Willits NOTARY PUBLIC								
BOISE OF IDAHO COMM. NO. 20204744								
10/80/10000			1		~~~~	**************************************		
My Commission Expires: 140470049								

Phil McGrane, JD, MPA Shak of the Change Copt. Trent Tripple hield fraging.

ADA COUNTY AFFIDAVIT OF CERTIFICATION OF SIGNATURES FOR A CANDIDATE PETITION

State of Idaho,)
) ss.
County of ADA)	

To the Clerk of CLERK OF BOISE CITY, for the State of Idaho:

I, Phil McGrane, County Clerk of Ada County hereby certify that __5 signatures on this petition for candidate *LUCI WILLITS* are those of qualified electors.

Phil McGrane

By PP