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PINAL COUNTY SCHOOL OFFICE

PINAL COUNTY
ELECTIONS DEPARTMENT

Pinal County
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Candidate Statement of Interest

4 - Year Term X
2 - Year Term ____

You are hereby notified that I, the undersigned, hereby declare my interest to run as a candidate for the office of Governing Board / Maricopa District 20, seeking the nomination of the Gov Board ~~Party~~, at the General Election to be held on Tuesday, November 3, 2026.

Candidate Information:

Name:	Last: Conley First: Loraine
Residence Address:	Street: 43844 W. Wade Drive City: Maricopa State: AZ Zip Code: 85138
Mailing Address:	Street: 43844 W Wade Drive City: Maricopa State: AZ Zip Code: 85138
Primary Phone:	(520) -840- 4472
Alternate Phone:	(520) 840- 4472
Email:	leccb1920@gmail.com
Website:	N/A

By submitting this document, I understand that any nomination petition signatures collected before the date of this Statement of Interest are invalid and may be subject to challenge pursuant to A.R.S. § 16-351.

Signature Loraine Conley Date 6/11/26