Write-in Candidate
NOMINATION PAPER
DECLARATION OF
QUALIFICATION
A.R.S. §§ 16-311, 16-312

RECEIVED
FOR OFFICE USE ONLY
JUL 07 2026
PINAL COUNTY SCHOOL OFFICE

____ 4 Year Term ____ 2 year Term

You are hereby notified that I, the undersigned, a qualified elector, am a candidate for the office of Coolidge Governing Board for the _____ Party (if applicable), at the PRIMARY or GENERAL (circle one) Election to be held on the 3 day of November, 2026.

I will have been a citizen of the United States for 47 years before my election and will have been a citizen of Arizona for 47 years before my election. I am 46 years old and my date of birth is September 23 (Month & Day), 1979 (Year), and therefore I will meet the Constitutional and/or statutory age requirement for taking said office. I have resided in PINAL county for 8 years, and have resided in BLACKWATER precinct for 8 years.

47 Squawbush Rd	Coolidge	85128
Actual residence address or description of place of residence (required)	City or Town	Zip
RR 1 Box 83 A	Coolidge	85128
Post office address (if applicable)	City or Town	Zip

Phone Number: Email:

Print or type your name on the following line in the exact manner you wish it to appear on the Notice of Official Write-In Candidates.

QUINTERO	VICTORIA
LAST NAME	FIRST NAME

I declare, under penalty of perjury, that the information in this Nomination Paper and Declaration of Qualification is true and correct, and that at the time of filing I am a resident of the county, district, or precinct, that I have no final, outstanding judgments against me of an aggregate of $1,000 or more that arose from failure to comply with or enforcement of campaign finance law, and as to all other qualifications, I will be qualified at the time of election to hold the office that I seek. If running in the General Election, I further certify that I am not disqualified from running as a write-in candidate pursuant to A.R.S. § 16-312(F).

CANDIDATE SIGNATURE

07.07.26
DATE

Sec. State Rev. 08/05/2021