Affidavit of Candidacy

Filing # 9

Minneapolis
City of Lakes

Minneapolis Elections & Voter Services

Correction to Affidavit of Candidacy:

Only minor corrections can be made without requiring completion of a new affidavit

Candidate's Name: Mohamoud Hassan

Office Filed For: Minneapolis City Council ward 6

Minor Correction Requested:

- Phone Number 612 701 9821
- Email BBCyare@Gmail.com
- Website Hassan4ward6.com
- Other

For completion by election official only

Received by: Kate Redden

Date and Time Received: 5/27/20 @ 1:45pm

Request Completed (select only one) :

In-person: ✓ Phone: _____ Email: _____

Office of the Minnesota Secretary of State

AFFIDAVIT OF CANDIDACY

Filing # 9
Cash/Check #
Amount $ 250

Instructions

All information on this form is available to the public. Information provided will be published on the Secretary of State's website. If filing for partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (*Minn. Stat.* 204B.03)

Candidate Information

Name and Office

Candidate Name (as it will appear on the ballot) MOHAMOUD Hassan

Office Sought CITY COUNCIL District # 6

For Partisan Office, Provide Political Party or Principle DEMOCRATIC-FARMER-LABOR

For Judicial Office, Provide Name of Incumbent

Residence Address

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

Street Address 1630 S. 6TH ST AP- D 616

City MPLS State MN Zip Code 55454

☐ **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 for my (or my family's) safety, or my address is otherwise private by Minnesota law. I have attached a separate form listing my residence address.

Campaign Address and Contact

Candidate Phone Number (Required) 612 701 9821

Campaign Contact Address (Required for those who have checked the box above): ~~BBcgare@gmail~~ com

Street Address

City State Zip Code

Website Email BBCgare@gmail.com

Affirmation

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 (except as provided in *M.S.* 204B.06, subd. 1 (2));
- 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 *Minn. Stat.* 243.166.
- **County, Municipal, School District, or Special District Office** – I meet any other qualifications for that office prescribed by law.

Candidate Signature Mohamoud Date 5-20-20

Subscribed and sworn to before me this 20 day of May, 20 20.

Katherine Redden

Notary public or other officer empowered to take and certify acknowledgement

Katherine Elizabeth Redden
State of Minnesota
Notary Public
My Commission Expires 01/31/2024

(Notary stamp)

White Copy – Filing Officer *Yellow Copy – CFPD Board* *Pink Copy – Public Information* *Goldenrod Copy – Candidate* *Rev. 5/2015*