

Instructions

Office of the Minnesota Secretary of State **AFFIDAVIT OF CANDIDACY**

Filing #	6
Cash/Check #	
Amount \$	500

All information on this form is available to the public. Information provided will be publish partisan office and not a major party candidate, you must file both an affidavit of candida		
Candidate Information	icy and a normination	g petition. (winni stat. 2045.05)
Name, Office, and Party		
Candidate Name (as it will appear on the ballot) Carrie Michels		
Office Sought Minnetonka City Council Ward 2		District # Ward 2
Political Party or Principle (State or Federal offices only)		
Name of Incumbent (Judicial seats only)		
Contact Information		
Required (federal, judicial, county attorney, and county sheriff candidates are exempt)	Check box if vou	u do not have an email address
Phone number 5072618542 Email (non-government issued) CarrieMi		[4] A. S. M.
Address Information		
Residence Address Required (unless box is checked; federal, judicial, county attorney, o	and county sheriff o	andidates are exempt)
My residence address is to be classified as private data. I certify a police report has been submitted, an order for protection has been issue safety; or my address is otherwise private by Minnesota law. I have attached a sep Residence Address 12713 Twelve Oaks Dr		
^{City} Minnetonka	State MN	Zip Code 55035
Campaign Contact Information (Address required if box above is checked) Campaign Address 12713 Twelve Oaks Dr		
^{City} Minnetonka	State MN	Zip Code 55035
Campaign Website Michels4Minnetonka.com		
Affirmation		
For all offices, I swear (or affirm) that this is my true name or the name by which I am g	onorally 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 ele 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 e If a major political party candidate, I either participated in the party's most recent prec party's candidates at the next general election. 	election; and	
If filing for one of the following offices, I also swear (or affirm) that I meet the requirem	nents listed below:	
 United States Senator – I will be an inhabitant of this state when elected and I will be a 		
not less than nine years on the next January 3rd, or if filled at special election, within 2		
 United States Representative – I will be an inhabitant of this state when elected and I States for not less than seven years on the next January 3rd, or if filled at special electi 		
 Governor or Lieutenant Governor – I will be at least 25 years old on the first Monday 	101 001	
less than one year on election day. I am filing jointly with		
Supreme Court Justice, Court of Appeals Judge, District Court Judge, or County Attorn		
 in Minnesota. My Minnesota attorney license number is Supreme Court Justice, Court of Appeals Judge, or District Court Judge – I will not turr 	and a copy of my l	
 Supreme Court Justice, Court of Appeals Judge, of District Court Judge – I will hot turn State Senator or State Representative – I will have maintained residence in Minnesota 		
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 Tra	ining 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		
County, Municipal, School District, or Special District Office – I meet any other qualified	cations for that offi	ce prescribed by law.
Candidate Signature and Alichula Dat	e_ 8/7/2.	3
Subscribed and sworn to before me this day of day of	, 20_23	- REBECCA M. KOOSMAN
Notary public or other officer empowered to take and certify acknowledgement		Notary Public-Minnesota Wy Commission Expires Jan 31, 2026