



Office of the City Clerk  
P.O. Box 1293  
Albuquerque, NM 87103  
Phone (505) 924-3650 Fax (505) 924-3660  
www.cabq.gov/clerk

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### Designation of Representatives

I, \_\_\_\_\_, a Candidate for \_\_\_\_\_ in the 2021 Regular Local Election, hereby designate the following individuals as representatives for my campaign for purposes of submitting materials to, or picking materials up from, the City Clerk's Office regarding my candidacy.

I am fully responsible for the statements made and materials submitted by these representatives on behalf of my campaign.

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Contact Number

\_\_\_\_\_  
Name of Representative

\_\_\_\_\_  
Contact Number

I, \_\_\_\_\_, hereby swear or affirm, under penalty of perjury under the laws of the State of New Mexico, that all the information on the uploaded form and on any attachment(s) is true, correct, and complete, to the best of my knowledge.

\_\_\_\_\_  
Date