

Alternative Method Affidavit

(Please Type)

OFFICE USE ONLY

2007 AUG 3 PM 3:46

I certify that I intend to qualify by the alternative method as a candidate for

the office of Orlando City Commission, Dist. 2
(include district, circuit, group or seat numbers)

as a:

Partisan Candidate, Member of the _____
Party

No Party Affiliation Candidate (formerly independent)

Nonpartisan Candidate (includes judicial offices)

Under penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.

Belinda Ortiz Belinda Ortiz
Print Name of Candidate Signature of Candidate

926 Sunwood Lane
Residence Address (do not use post office box)

Orlando FL 32807
City State Zip Code

(407) 313-5035 ()
Day Phone Fax Number