

Alternative Method Affidavit

(Please Type)

I certify that I intend to qualify by the alternative method as a candidate for the office of Orlando City Commissioner District 1
(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.

Charles Thomas Keen III

Print Name of Candidate



Signature of Candidate

8326 Laureate Blvd.

Residence Address (do not use post office box)

Orlando

FL

32827

City

State

Zip Code

(407) 900-5668

Day Phone

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Fax Number