



DECLARATION FOR OFFICER CANDIDACY FORM
For South Florida Paralegal Association, Inc.'s Fiscal Year 2021-2022

TO: SFPA Elections Committee
Attn: Chairperson
123 S.E. 3rd Avenue, #367
Miami, FL 33131
sfpa-elections@sfpa.info

I hereby declare my candidacy for _____.
I further declare that I am an Active Member of the South Florida Paralegal Association, Inc., and that I meet the qualifications of this office pursuant to the bylaws.

DATE: _____

SIGNATURE: _____

PRINT NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

EMPLOYER: _____

**DECLARATIONS FOR OFFICER CANDIDACY MUST BE RECEIVED BY
MARCH 15, 2021 VIA U.S. MAIL OR EMAIL AT: SFPA-ELECTIONS@SFPA.INFO**