



Affidavit of Candidacy

Information on this affidavit is public data unless noted as private. See the reverse side for more filing information.

Filing # ATL-4 Fee Amount \$ 500
 Circle payment method:
 Cash | Card | Petition | Check # _____
 Viewed ID or proof of residence
 Reviewed affidavit for completeness

Candidate Information

Candidate name as it will appear on the ballot Mitchel Kulage
Clearly write or type in mixed upper- and lower-case | Include punctuation and accents | No professional titles
 Candidate name pronunciation sounds like Mit-Chel Koo-la-gee
If left blank, the accessible ballot marking device's default pronunciation of your name will be used
 Office sought City Council District /Seat number if applicable At-Large

Contact Information

Email non-government Kulage200@gmail.com
 Phone number (314) 971-6550
 Check box if you do not have email
If you check both this box and the private box below, you must provide an address in Campaign Contact

Residence Address

REMAIN PRIVATE Both boxes must be checked **OR** **NOT PRIVATE** Must provide if boxes to the left are not checked

- I request that my residence address be classified as private data.
- I have completed the Address of Residence Form on the next page.

Residence street address _____
 City _____
 State _____ Zip code _____

Campaign Contact

Campaign address Optional unless private boxes checked and no email provided _____
 City Hastings State MN Zip code 55033
 Campaign website Optional KulageAtLarge.com can be updated with filing officer any time

Affirmation & Signature I swear (or affirm):

- This is my true name or the name by which I am generally known in the community.
- I am eligible to vote in Minnesota.
- I have not filed for the same or any other office at the upcoming primary or general election (unless authorized by Minn. Stat. 204B.06, subd. 9).
- 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 election.
- I have provided valid identification or documentation of proof of residence authorized in Minn. Stat. 204B.06, subd. 1b that matches the residence address information provided on this affidavit or on a separate form, if address is classified as private data.
- I have provided my phonetic name pronunciation above or I certify that I am directing the official responsible for programming materials for the election to use the applicable technology's default pronunciation of my name.
- If filing for School Board Member: I also swear (or affirm) I have not been convicted of an offense for which registration is required under Minn. Stat. 243.166.
- I meet any other qualifications for this office prescribed by law.

Candidate signature [Signature] Date 06/01/26

Signature of notary public or other officer empowered to take and certify acknowledgment [Signature]

Subscribed and sworn to before me this 1st day of June, 2026



Notary Stamp