**FORMATO DE SOLICITUD DE REGISTRO DE ASPIRANTE A**

**CANDIDATA O CANDIDATO INDEPENDIENTE A MIEMBRO DE AYUNTAMIENTO**

Colima, Colima; a \_\_\_ de diciembre de 2023.

**Licda. María Elena Adriana Ruiz Visfocri**

**Consejera Presidenta del Consejo**

**General del Instituto Electoral**

**del Estado de Colima**

**P r e s e n t e**

Con fundamento en los artículos 35, fracción II de la Constitución Política de los Estados Unidos Mexicanos; 88 de la Constitución Política del Estado Libre y Soberano de Colima; 328, 333, 334 y 335 del Código Electoral del Estado de Colima; en términos del Reglamento de Elecciones del Instituto Nacional Electoral y del Reglamento de Candidaturas Independientes del Instituto Electoral del Estado de Colima para el Proceso Electoral Local 2023-2024, aprobado por el Consejo General del Instituto Electoral del Estado de Colima, señalando como domicilio para oír y recibir notificaciones, el ubicado en \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, con número telefónico (*incluir clave lada*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ y/o correo electrónico\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; manifestamos nuestra intención de participar como aspirantes a la Candidatura Independiente para el Proceso Electoral Local 2023-2024 en el estado de Colima, conforme a lo siguiente:

**ELECCIÓN DE AYUNTAMIENTO POR EL MUNICIPIO DE:**

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| **Propietarios(as)** | | | | | |
| **Cargo** | | **Apellido Paterno** | | **Apellido Materno** | **Nombre (s)** |
| Presidente(a) | |  | |  |  |
| Síndico(a) | |  | |  |  |
| 1er. Regidor(a) | |  | |  |  |
| 2do. Regidor(a) | |  | |  |  |
| 3er. Regidor(a) | |  | |  |  |
| 4to. Regidor(a) | |  | |  |  |
| 5to. Regidor(a) | |  | |  |  |
| 6to. Regidor(a) | |  | |  |  |

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| **Suplentes** | | | |
| **Cargo** | **Apellido Paterno** | **Apellido Materno** | **Nombre (s)** |
| Presidente(a) |  |  |  |
| Síndico(a) |  |  |  |
| 1er. Regidor(a) |  |  |  |
| 2do. Regidor(a) |  |  |  |
| 3er. Regidor(a) |  |  |  |
| 4to. Regidor(a) |  |  |  |
| 5to. Regidor(a) |  |  |  |
| 6to. Regidor(a) |  |  |  |

*Para el caso de Regidurías se procederá en el siguiente número de conformidad a lo dispuesto en el artículo 92 de la Constitución local:*

* *Municipios de Colima, Manzanillo, Tecomán y Villa de Álvarez, 6 Regidurías.*
* *Municipios de Armería y Cuauhtémoc, 5 Regidurías.*
* *Municipios de Comala, Coquimatlán, Minatitlán e Ixtlahuacán, 4 Regidurías.*

Para tal efecto, precisamos la información siguiente:

**Presidente(a) Propietario (a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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| Sobrenombre (en su caso) | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**Síndico(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**1er. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**2do. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
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| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**3er. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
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| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**4to. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
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| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**5to. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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|  | | | | | | | | | | | |  |  | Jóvenes | | | | | | | | | | |
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|  | | | | | | | | | | | |  |  | Atención Prioritaria (Indígenas, Discapacidad o LGBT+) | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**6to. Regidor(a) Propietario(a):**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**Presidente(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**Síndico(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**1er. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**2do. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**3er. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**4to. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**5to. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

**6to. Regidor(a) Suplente:**

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| Apellido Paterno | | | | | | | | | | Apellido Materno | | | | | Nombre (s) | | | | | | | | | |
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|  | | | | | | | |  | | Lugar de nacimiento | | | | | | |  | Fecha de nacimiento (Día, mes y año) | | | | | | | |
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|  | |  | Hombre | |  | Mujer |  | | No binario | | |  |  | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | Ocupación | | | | | | | | | | | |
| Lineamiento que atiende: | | | | | | | | | | | |  |  | Paridad | | | | | | | | | | |
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|  | | | | | | | | | | | |  |  | Atención Prioritaria (Indígenas, Discapacidad o LGBT+) | | | | | | | | | | |
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Domicilio (calle, número, colonia, código postal, municipio y entidad)

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|  | Años |  | Meses |

Tiempo de residencia en el domicilio

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Clave de elector

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RFC *de la ciudadana o el ciudadano interesado(a)*

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| Teléfono oficina |  |  | Teléfono celular |  |

En términos de la fracción VI del artículo 334 del Código Electoral del Estado de Colima, designamos como nuestro Representante a:

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|  | Apellido Paterno | Apellido Materno | Nombre (s) |

Y como Responsable del registro, administración y gasto de los recursos a utilizar en la obtención del respaldo ciudadano a:

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|  | Apellido Paterno | Apellido Materno | Nombre (s) |

Asimismo, acompañamos a la presente notificación, los documentos siguientes:

1. Copia certificada del acta de nacimiento de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla.
2. Copia simple del anverso y reverso de la credencial para votar vigente de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla, así como del o la Representante y del o la Responsable del registro, administración y gasto de los recursos a utilizar en la obtención del respaldo ciudadano.
3. Constancia original de estar inscrito(a) en la Lista Nominal de Electores de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla (expedida por el Instituto Nacional Electoral).
4. Constancia original de residencia de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla.
5. Programa de Trabajo que se promoverá.
6. Plataforma Electoral en la que basarán las propuestas.
7. Formato aprobado por el IEE de la Declaración de situación patrimonial y de no conflicto de intereses (Anexo 2) de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla.
8. Copia previo cotejo de su original de su Declaración fiscal por el ejercicio 2022 de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla en caso de encontrarse obligados(as) de conformidad con las disposiciones fiscales vigentes.
9. En su caso, presentar manifestación escrita con firma autógrafa bajo protesta de decir verdad, de no encontrarse obligado(a) a presentar la Declaración fiscal señalada (Anexo 3).
10. Manifestación escrita bajo protesta de decir verdad de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla que cumple con los requisitos señalados por la Constitución local y el Código en la materia para el cargo de elección popular de que se trate (Anexo 4B).
11. Manifestación de conformidad para que todos los ingresos y egresos de la cuenta bancaria aperturada sean fiscalizados, en cualquier momento por el Instituto Nacional Electoral (Anexo 5)
12. Copia certificada del instrumento notarial número \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, de fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ expedida por el Lic. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notario Público número\_\_\_\_\_\_\_\_\_\_ del estado de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, en el que consta el Acta Constitutiva de la Asociación Civil denominada \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (elaborada de conformidad con el Anexo 6), la cual se encuentra debidamente inscrita ante el Registro Público de la Propiedad y del Comercio del Gobierno del Estado de Colima.
13. Documentación emitida por el Servicio de Administración Tributaria en el que conste el Registro Federal de Contribuyentes de la Asociación Civil \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ante dicha autoridad.
14. Copia simple del contrato de fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ relativo a la cuenta bancaria número \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, aperturada ante la institución bancaria \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ a nombre de la Asociación Civil.
15. En su caso, manifestación escrita del(la) aspirante a la candidatura independiente a Presidente(a) Municipal en la que acepta recibir notificaciones vía correo electrónico sobre la utilización de la aplicación móvil, así como para recibir información sobre el respaldo ciudadano entregado al INE por esa modalidad (Anexo 7).
16. Manifestación escrita de los y las aspirantes propietarios(as) y suplentes integrantes de la planilla de no aceptación de recursos de procedencia ilícita para el financiamiento de cualquiera de las actividades destinadas a obtener el respaldo ciudadano para la candidatura independiente (Anexo 8).
17. Identificación de los colores y, en su caso, emblema que pretenda utilizar en la propaganda para obtener el respaldo ciudadano (Anexo 15), los cuales no podrán ser iguales o semejantes a los utilizados por los partidos políticos, el INE o el IEE.
18. Manifestación bajo protesta de decir verdad, de no estar inscrito(a) en el Registro Nacional de Personas Sancionadas en Materia de Violencia Política contra las Mujeres en Razón de Género, ni en el Registro de Deudores Alimentarios Morosos en el estado de Colima, así como de no tener sentencia firme condenatoria por los delitos contra la vida y la integridad corporal; contra la libertad y seguridad sexuales, el normal desarrollo psicosexual; por violencia familiar, violencia familiar equiparada o doméstica, violación a la intimidad sexual; así como por violencia política contra las mujeres en razón de género (Anexo 18).

Bajo protesta de decir verdad, manifestamos al Instituto Electoral del Estado de Colima, que el contenido de la presente solicitud de registro de aspirante y la documentación que la conforma, es plenamente veraz.

**A t e n t a m e n t e**

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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de Presidente(a) Municipal* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de Presidente(a) Municipal* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de Síndico(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de Síndico(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 1er. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 1er.*  *Regidor(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 2do. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 2do.*  *Regidor(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 3er. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 3er.*  *Regidor(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 4to. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 4to.*  *Regidor(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 5to. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 5to.*  *Regidor(a)* |
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| *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente propietario(a) para el cargo de 6to. Regidor(a)* |  | *Nombre completo y firma o huella dactilar*  *del (la) ciudadano(a) interesado(a) en registrarse como aspirante a candidato(a)*  *independiente suplente para el cargo de 6to.*  *Regidor(a)* |

***NOTA:***

*1.En todos los rubros se deberá incluir la descripción del documento que se entregue.*

La información incluida en este documento y sus anexos será utilizada por el Instituto Electoral del Estado de Colima únicamente para el procedimiento de verificación de los requisitos para obtener el registro como aspirante a candidatura independiente, por lo que los datos personales serán resguardados en términos de lo previsto en la Ley de Trasparencia y Acceso a la Información Pública del Estado de Colima y Ley de Protección de Datos Personales en posesión de sujetos obligados para el Estado de Colima.