

Signatures must be procured within the legal period for securing same; and this Petition must be filed in the office of the County Board of Elections on or before the last day prescribed by law. EACH SIGNER MAY SIGN PETITIONS FOR AS MANY CANDIDATES FOR EACH OFFICE AS HE CAN VOTE FOR, AND NO MORE.

COMMONWEALTH OF PENNSYLVANIA

PETITION

To have name of Candidate printed upon the Official Ballot for the General Primary

We, the undersigned, all of whom are qualified electors of _____ County and of _____, and are registered
(PRECINCT IN WHICH THE NOMINATION OR ELECTION IS TO BE MADE)

and enrolled members of the _____ Party or Policy, hereby petition the County Board of Elections of _____ County to have the name of _____, whose
(TYPEWRITE, PRINT OR WRITE PLAINLY THE ABOVE NAME AS YOU WISH IT TO APPEAR ON THE OFFICIAL BALLOT)

Profession, Business or Occupation is _____, Place of Residence is _____,
(WITH STREET, NUMBER (WHERE POSSIBLE) AND ZIP CODE)

be printed upon the Official Ballot of the Aforesaid Party in the said District, for the General Primary for the year _____, as a candidate for the Office of:

_____ for a _____ year term.
(TITLE OF OFFICE)

for office use only please

SIGNERS ARE CAUTIONED TO AVOID THE USE OF DITTO MARKS

| | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED | | | DATE OF SIGNING |
|----|----------------------|-------------------------|---------------------------------------|----------------|--------------|-----------------|
| | | | HOUSE NO. | STREET or ROAD | MUNICIPALITY | |
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STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1 - 5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

1 _____
County of Petition-Signers' Residence
2 _____
Printed Name of Circulator
3 _____
Signature of Circulator
4 _____
Number and Street Address of Circulator
5 _____
City, Borough or Twp. Zip Code

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____

SS:

Before me, the undersigned authority in and for said State and County, personally appeared the undersigned, who, being duly sworn according to law, did depose and say that his or her residence is as set forth below; that his or her election district is as set forth below; that the name of the office for which he or she consents to be a candidate is:

(TITLE OF OFFICE, PARTY and LENGTH OF TERM)

that he or she is eligible for said office; that he or she is a registered and enrolled member of the designated party; that he or she will not knowingly violate any election law, or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that he or she is aware of the provisions of Section 1626 of The Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; and that he or she is not a candidate for an office which he or she already holds, the term of which is not set to expire in the same year as the office subject to the affidavit. Also that he or she is not a candidate for nomination for the same office of any political party other than the one designated in this petition. (Underlined portion not applicable to Candidates for the offices of School Director or Magisterial District Judge.)

Sworn to and subscribed before me this _____ day of _____, 20

NOTARY STAMP

(SIGNATURE of NOTARY)

(SIGNATURE of CANDIDATE)
(PRINTED NAME of CANDIDATE)
(STREET ADDRESS, POST OFFICE OF CANDIDATE)
(MUNICIPALITY OF CANDIDATE)
(ELECTION DISTRICT OF CANDIDATE)

Party _____
Office of _____
City _____
Borough _____ } of _____
Township _____ }
Ward _____ District _____
For a _____ Term _____
PETITION
To Have Name of _____
(Write or print name plainly as you wish it to appear on ballot)
As Candidate Printed
On the Official Ballot
of
The Above Named Party,
District and Office
For the
GENERAL PRIMARY
For the Year 20 _____
Email: _____
Filed in the Office of the County Board of Elections.
_____ 20 _____
Clerk.