truly s electio	tated opposite on to public offi	my signature, and tice (or public offices	that I do hereby nominate the following i) to be voted for at the election to be he	named person (or peld on the day	that my present place of residence is persons) as a candidate (or as candidates) for y of, 20,
			l in emblem)		as the name of the independent body making ne emblem of such body.
Nam	Name of Candidate Public Office (Include district number, if applicable			Term	Residence Address
			es and addresses of at least three persor		ll be registered voters within such political unit),
In witı	ness whereof, I		my hand, the day and year placed oppos	ite my signature.	
Date	:	Name of Signer (Signature required. Printed name may be added)		Residence	
1.	/ / 20				
	Printed Name →				
2.	/ /20				
	Printed Name →			Ī	
3.	/ /20				
	Printed Name →				
4.	/ /20				
	Printed Name →				
5.	/ / 20				
	Printed Name →				
			(You may use fewer or more signature lines -	this is only to show fo	ormat.)
I (nes	sidence address) :)	state that I am a duly signatures, subscribed h	Each of the	e voters whose names are subscribed to this
			pe accepted for all purposes as the equives as if I had been duly sworn.	alent of an affidavi	t and, if it contains a material false statement,
 Dat	<u></u>	 Signa	ture of Witness		

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