

NOMINATION PAPER

We, the undersigned citizens of District _____, hereby nominate _____

For the Office of _____

For the City of _____

1) PRINTED NAME: _____

Signature: _____

2) PRINTED NAME: _____

Signature: _____

3) PRINTED NAME: _____

Signature: _____

4) PRINTED NAME: _____

Signature: _____

5) PRINTED NAME: _____

Signature: _____

6) PRINTED NAME: _____

Signature: _____

7) PRINTED NAME: _____

Signature: _____

Candidate's Personal Information

_____ Candidate's Name	_____ Phone Number	
_____ Candidate's Residential Address	_____ Email Address	
_____ Mailing Address (if different from above)		
_____ City	_____ State	_____ Zip