

Partisan Nomination Petition

Put optional photo
here

I, the undersigned, a qualified elector of the county of Maricopa, state of Arizona, and of (here name political division or district from which the nomination is sought) Legislative District # / Precinct Name and a member of the Republican party or a person who is registered as no party preference or independent as the party preference or who is registered with a political party that is not qualified for representation on the ballot, hereby nominate Your Name who resides at Your complete address in the county of Maricopa for the party nomination for the office of Precinct Committeeman to be voted at the primary election to be held August 30, 2016 as representing the principles of such party, and I hereby declare that I am qualified to vote for this office and that I have not signed, and will not sign, any nomination petition for more persons than the number of candidates necessary to fill such office at the next ensuing election. I further declare that if I choose to use a post office box address on this petition, my residence address has not changed since I last reported it to the county recorder for purposes of updating my voter registration file.

Signature	Printed name	Actual residence address, description of place of residence or Arizona post office box address, city or town	Date of signing
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Instructions for Circulators

1. All petitions shall be signed by circulator.
2. Circulator is not required to be a resident of this state but otherwise must be qualified to register to vote in this state and, if not a resident of this state, shall register as a circulator with the secretary of state.
3. Circulator's name shall be typed or printed under the circulator's signature.
4. Circulator's actual residence address or, if no street address, a description of residence location shall be included on the petition.

I, Person who collected signatures a person who is not required to be a resident of this state but who is otherwise qualified to register to
(Printed Name)
vote in the county of Maricopa, in the state of Arizona, hereby verify that each of the names on the petition was signed in my
presence on the date indicated; that in my belief each signer was a qualified elector who resides at the address given as their residence on the date
indicated. I further verify that each signer is a member of the party from which the candidate is seeking nomination, or the signer is a member of a political
party that is not entitled to continued representation on the ballot, or the signer is registered as independent or no party preferred.

Signature of person who collected signatures

Signature of Circulator

Printed name of person who collected signatures

Typed or Printed Name of Circulator

Address of person who collected signatures

Circulator's Actual Residence Address
(If no street address, a description of residence location shall be included on the
petition)

City/Zip of person who collected signatures

City or Town and Zip Code