



DELBERT HOSEMANN  
Secretary of State

# Candidate Petition

## MUNICIPAL SEPARATE SCHOOL DISTRICT TRUSTEE

To: Election Commission of \_\_\_\_\_, We the undersigned qualified electors of the  
 \_\_\_\_\_, *Name of County*  
 \_\_\_\_\_, County of \_\_\_\_\_, State of Mississippi hereby petition  
*Area Represented by the Office Sought*  
 the name of \_\_\_\_\_ be placed upon the ballot of the election to be held on \_\_\_\_\_,  
 20\_\_\_\_\_, as a candidate for the office of \_\_\_\_\_ Municipal Separate School District Trustee.

In compliance with Miss. Code Ann. § 37-7-211, the name of any qualified elector who is otherwise eligible under the provisions of Miss. Code Ann. § 37-7-203 shall be placed on the ballot used in the election, provided the candidate for the office of trustee files with the county election commissioners a petition signed by not less than fifty (50) qualified electors of the area represented by the office he seeks, either for a full term or an unexpired term, as the case may be, and an affidavit by the candidate offering for election stating his qualifications under the terms of the section, by 5:00 p.m. no more than ninety (90) days and not less than sixty (60) days before the election. Where there are less than one hundred (100) qualified electors in said area represented by the trustee, it shall only be required said petition be signed by at least twenty percent (20%) of the qualified electors in said area.

- |                                     |                                      |
|-------------------------------------|--------------------------------------|
| 1. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |
| 2. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |
| 3. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |
| 4. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |
| 5. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |
| 6. SIGNATURE _____<br>Address _____ | Printed Name _____<br>Precinct _____ |

STATE OF MISSISSIPPI  
 COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a qualified elector of said county, do now state under oath that every person who signed the foregoing petition signed his or her name thereto in my presence; that all signatures affixed hereto are the personal signatures of the person whose name appears in print; that I believe each has stated his or her name correctly, and that so far as I know, each signer is a qualified elector of the county and area represented by the office sought by this candidate.

\_\_\_\_\_  
 SWORN TO AND SUBSCRIBED BEFORE ME, this the \_\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_  
 NOTARY PUBLIC

*Copy this form for succeeding pages. The appropriate Circuit Clerk must certify signatures on this form. The opening paragraph of each page of signatures MUST include: (1) the name of the candidate, (2) office sought, and (3) date of the election.*