



Candidate Petition

MUNICIPAL INDEPENDENT CANDIDATE

TO ELECTION COMMISSION of _____: We the undersigned
Name of Municipality
 qualified electors of _____, County of _____,
Name of Municipality
 State of Mississippi, hereby petition that the name of _____ be placed
 upon the General Election ballot scheduled to be held _____, 20____, as a
 candidate for the office of _____, Ward No. _____.

In compliance with Miss. Code Ann. § 23-15-361: (1) The municipal general election ballot shall contain the names of all candidates who have been put in nomination by the municipal primary election of any political party. There shall be printed on the ballots the names of all persons so nominated, whether the nomination be otherwise known or not, upon the written request of one or more of the candidates so nominated, or of any qualified elector who will make oath that he was a participant in the primary election, and that the person whose name is presented by him was nominated by such primary election. The municipal election commissioner designated to have the ballots printed shall also have printed on the ballot in any municipal general election the name of any candidate who, not having been nominated by a political party, shall have been requested to be a candidate for any office by a petition filed with the clerk of the municipality no later than 5:00 p.m. on the same date by which candidates for nomination in the municipal primary elections are required to pay the fee provided for in Section 23-15-309, and signed by not less than the following number of qualified electors: (a) For an office elected by the qualified electors of a municipality having a population of one thousand (1,000) or more, not less than fifty (50) qualified electors. (b) For an office elected by the qualified electors of a municipality having a population of less than one thousand (1,000), not less than fifteen (15) qualified electors.

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| 1. SIGNATURE _____
Address _____ | Printed Name _____
Precinct _____ |
| 2. SIGNATURE _____
Address _____ | Printed Name _____
Precinct _____ |
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| 8. SIGNATURE _____
Address _____ | Printed Name _____
Precinct _____ |
| 9. SIGNATURE _____
Address _____ | Printed Name _____
Precinct _____ |
| 10. SIGNATURE _____
Address _____ | Printed Name _____
Precinct _____ |

Copy this form for succeeding pages. The appropriate registrar 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.