**DELBERT HOSEMANN**
*Secretary of State*

## Candidate Petition
# Independent Candidate

**TO ELECTION COMMISSION of** _____ **County:**

We, the undersigned qualified electors of _____,
*(County/District name and number, as applicable)*

State of Mississippi, hereby petition that the name of_____ be

placed upon the ballot of the _____election to be held on _____, 20_____,
*(General/Special)*

as a candidate for the office of _____.
*(Office sought and District, if applicable)*

1.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

2.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

3.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

4.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

5.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

6.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

7.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

8.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

9.  **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

10. **SIGNATURE**_____     **Printed Name** _____

   Address_____     Precinct _____

**Copy this form for succeeding pages.**
**The appropriate county registrar must certify signatures on this form.**
The opening paragraph of <u>each page</u> of signatures MUST include:
   (1)  The name of the candidate,
   (2)  office sought, AND
   (3)  date of the election.

*This petition shall be used **only** for candidates <u>whose district falls wholly within one county</u>.*