Candidate Petition
INDEPENDENT CANDIDATE FOR ALDERMAN

TO ELECTION COMMISSION of __________________________: We the undersigned qualified electors of __________________________, County of __________________________, 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 Alderman, Ward No.______.

Any candidate seeking to be an independent candidate for municipal office must file a Statement of Intent and Petition signed by not less than the following number of qualified electors: (a) for an office elected by the qualified electors of a municipality at large, or by a ward or district, having a population of one thousand (1,000) or more, not less than fifty (50) qualified electors, or (b) for an office elected by the qualified electors of a municipality at large, or by a ward or district, having a population of less than one thousand (1,000), not less than fifteen (15) qualified electors, with the Municipal Clerk’s Office 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.

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 municipal 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.

Revised Oct-17