Candidate Petition
Independent Candidate

TO: STATE BOARD OF ELECTION COMMISSIONERS
c/o SECRETARY OF STATE C. DELBERT HOSEMANN, JR.
P.O. Box 136
Jackson, MS 39205-0136

We, the undersigned qualified electors of _____ in the
(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 _____.

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 _____

<u>Copy this form for succeeding pages.</u>
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.