



DELBERT HOSEMANN
Secretary of State

Petition
INDEPENDENT U.S. CONGRESS/ U.S. SENATE
CANDIDATE

TO: STATE BOARD OF ELECTION COMMISSIONERS
c/o DELBERT HOSEMANN, Secretary of State
P.O. Box 136
Jackson, MS 39205-0136

We, the undersigned qualified electors of the _____ district of the
_____ 1st, 2nd, 3rd or 4th U.S. Congressional, or U.S. Senate
State of Mississippi, hereby petition that the name of _____
be placed upon the ballot of the _____ election to be held on _____,
_____ *General/Special*
as an independent 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 _____ |

Copy this form for succeeding pages.

The appropriate county registrar must certify signatures on this form

The opening paragraph of each page of signatures **MUST** include:

The name of the candidate, office sought, and date of the election.