

(PARTY OFFICE)
Revised 1/2020

PRINT PLAINLY
COMMONWEALTH OF PENNSYLVANIA

PETITION

TO HAVE NAME OF CANDIDATE PRINTED UPON THE OFFICIAL PRIMARY BALLOT

NAME _____ **VOTERS ID** _____
If Known

MAILING ADDRESS _____
Number Street Post Office Zip

RESIDENCE _____
Municipality Ward District

Profession/Business/Occupation of Candidate Party of Signers Year of Primary

We, the undersigned, all of whom are qualified electors of

(No. of Ward) WARD (No. of District) DISTRICT OF (Municipality)

And are registered and enrolled members of the political party set forth above, and have signed no other petition inconsistent herewith, hereby petition the County Board of Elections of Allegheny County to have the above candidate's name whose address, profession, business or occupation are set forth above, printed on the official ballot of the said Party, in the said County, for the Primary for the year set forth above as a candidate for the office of

TITLE OF OFFICE

SIGNERS ARE CAUTIONED TO AVOID THE USE OF DITTO MARKS

	SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	PLACE OF RESIDENCE			DATE of Signing
			House No.	Street or Road	Municipality	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in This nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date opposite his or her name; that to the best of my knowledge and belief the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

1. _____
Printed Name of Circulator

2. _____
Signature of Circulator

3. _____
Number and Street Address of Circulator

4. _____
City, Borough or Twp. Zip Code

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Before me, the undersigned authority in and for said State and County, personally appeared the undersigned, who, being duly sworn according to law, did depose and say that his or her residence is as set forth below; that he or she is a qualified elector duly registered and enrolled as a member of the political party and of the political district referred to in this petition; that the name of the office for which he or she consents to be a candidate is as set forth below; that he or she is eligible for said office; that he or she will not knowingly violate any election law, or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith.

(Title of Office)

Sworn to and subscribed before me

this _____ day of _____, 20 _____

(Official Title)

My commission expires _____

Signature of Candidate

Printed name of Candidate Phone Number
(During Day)

Street Address Post Office

Municipality

Ward _____ District _____
Election District of Candidate

NOTE

Candidates who intend filing petitions should present them for filing at least a week before the last day fixed for filing, so that the petition can be examined and if corrections, additions or alterations are found necessary, there may be time to make the required changes.

Received

Filed in the Office of the
Allegheny County Board of Elections

Entered by _____

Entry Checked by _____

B. C. Checked by _____