Commonwealth of Pennsylvania 2020 NOMINATION PAPER

NOTE: You must fill in all information in A, B & C before you begin collecting for signatures.

A. PREAMBLE

TO THE SECRETARY OF THE COMMONWEALTH:

We, the u the electora as candida designated in "C" below as the committee authorized to fill any vacancy caused by the death or

withdrawal of any such candidates.	
1. Name of Political Body	
2. County of Signers	

undersigned, all of whom are qualified electors of Pennsylvania, of the County, and of
al district(s) designated below, hereby nominate the persons designated in "B" below
ites representing the political body named herein, and also appoint the persons

OFFICIAL USE ONLY

B. CANDIDATE INFORMATION						
			PLACE OF RES			
OFFICE TITLE	DISTRICT	NAME OF CANDIDATE	House No. Street or Road	City, Boro or Twp.	OCCUPATION	

PRESIDENTIAL ELECTORS:

NAME	RESIDENCE	OCCUPATION	NAME	RESIDENCE	OCCUPATION
1.			11.		
2.			12.		
3.			13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

C. COMMITTEE TO FILL VACANCIES		PLACE OF RESIDENCE	
NAME OF COMMITTEE MEMBER	House No.	Street or Road	City, Boro or Twp.
1.			
2.			
3.			
4.			
5.			

D. SIGNATURES OF ELECTORS

SIGNATURE OF ELECTOR	PRINTED NAME	PLACE OF RESIDENCE		DENCE	DATE OF
	OF ELECTOR		Street or Road	City, Boro or Twp.	SIGNING
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

D. SIGNATURES OF ELECTORS (Continued)

SIGNATURE OF ELECTOR	DATE OF SIGNING
10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 1	ING
11. 12. 13. 14. 15. 16. 17. 18. 19. 19. 20. 21. 22. 23.	
12. 13. 14. 15. 15. 16. 17. 18. 19. 1	
13. 14. 15. 16. 17. 18. 19. 19. 20. 19. 21. 19. 22. 19. 23. 19.	
14. 15. 16. 17. 18. 18. 19. 1	
15. 16. 17. 18. 19. 19. 20. 19. 21. 19. 22. 19. 23. 19.	
16. 17. 18. 19. 20. 21. 22. 23.	
17. 18. 19. 1	
18. 19. 20. 21. 22. 23.	
19. 20. 21. 22. 23.	
20. 21. 22. 23.	
21. 22. 23.	
22. 23.	
23.	
24.	
25.	
26.	
27.	
28.	
29.	
30.	
31.	
32.	
33.	
34.	
35.	

E. STATEMENT OF CIRCULATOR

that their residences are corre	ctly stated therein; that they a		elow; that each signed on t	full knowledge of the contents thereof; he date set opposite his or her name; I in this nomination paper.	
, , , , ,	•	e Commonwealth of Pennsylvania aws of the Commonwealth of Pen		ntroversy arising out of my activities	
		County			
County of Pape	r Signers' Residence				
I,Printed Name of Circulator		, state that I am the person whom I represent myself to be herein, and I state that the information set forth in this section is true and accurate and made subject to the criminal penalties imposed by law for violation of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).			
Signature:		Date:			
			MM/DD/YY		
Address of Circulator:					
	Number	Street			
	City, Boro or Twp.	State	Zip Code		
NOTE	E: THIS STATEMENT MUST	BE COMPLETED AFTER ALL S	IGNATURES HAVE BEEN	I OBTAINED.	