## Petition Independent Candidate Federal/State/District Office

FOR OFFICE USE ONLY				
Valid of				
By Date				

TO: The Honorable John Thurston, Secretary of State	
State Capitol, Room 026	
Little Rock, Arkansas 72201-1094	
We, the undersigned qualified electors propose that	
	(Name)
be placed on the ballot as an Independent Candidate for the Office of	, District (if applicable),

Position\_\_\_\_\_ in the General Election to be held on \_\_\_\_\_\_. Each of us for himself or herself says: I have personally signed this petition; I am a registered voter of the State of Arkansas and the designated district to be represented, and my printed name, date of birth, residence, city or town of residence, and date of signing are correctly written after my signature.

	Signature	Printed Name	Date of Birth	Residence (Street Address)	City or Town of Residence	Date of Signing
1						
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Pursuant to Act 340 of 2015, this petition page format, on legal size paper, is prescribed by the Secretary of State. Arkansas Code Annotated §7-7-103 (as amended).