

PETITION SIGNATURES

Signatures must be from registered voters of the ward or city in which the election is to be held. The address on the petition form **must** match the address on the voter database.

						Valid of	
(Sample Petition of Nomination)					By Date		
Mayor – Council Form of Government Municipal Candidates for Incorporated Towns (all positions),							
	Cities of the 151 CI	Municipal Candidates for ass (except council memb			uncil member)		
The H		Count	,	i tile 2 Ciass (except co	ancii member)		
				. Arkansas, being in	number not less than	ten (10) fo	
orporate	ed towns and cities of the 2°	of the city (town) of d class, and not less than thirty	(30) for cities of th	ne 1st class, do hereby petition	that the name of	<u> </u>	
andidate	e for council member in an ir	be placed on the ballot for t ncorporated town), at the next e	lection of municip	oal officials in 20 Ea	ch of us for himself or	r running a r herself	
J. 1 1141	re personany signed ans pen	mon, rum a registered roter or	tile otate of Airkail	sus und the designated city to	be represented. My pr	rinted name	
e or birt	f birth, residence, city or town of residence, and date of signing are correctly written after my signature. Date City or						
	Signature	Printed Name	of Birth	Residence (Street Address)	Town of Residence	Date of Signing	

Verify signatures using the Secretary of State's VoterView

WWW.VOTERVIEW.AR-NOVA.ORG/VOTERVIEW

Registration Information Confirm your address, party association, ballot statuses, and polling place locations. Not yet registered? First Name Last Name Last Name Date of Birth Month V Day V Year V Look Up

