

Signatures must be procured within the legal period for securing same: and this Petition must be filed in the office of the County Board of Elections on or before the last day prescribed by law

EACH SIGNER MAY SIGN PETITIONS FOR AS MANY CANDIDATES FOR EACH OFFICE AS HE CAN VOTE FOR, AND NO MORE

COMMONWEALTH OF PENNSYLVANIA PETITION

To have name of Candidate Printed upon the Official Ballot For the Primary Election

We, the undersigned, all of whom are qualified electors of _____ County and

_____ and are registered and
(ELECTORAL DISTRICT IN WHICH THE NOMINATION OR ELECTION IS TO BE MADE)

Enrolled members of the _____ Party or Policy, hereby

petition the County Board of Elections of _____ County

to have the name of _____

(TYPEWRITE, PRINT OR WRITE PLAINLY THE ABOVE NAME AS YOU WISH IT TO APPEAR ON THE OFFICIAL BALLOT)

whose Profession, Business or Occupation is _____ Place of

Residence is _____

(WITH STREET, NUMBER (WHERE POSSIBLE) AND ZIP CODE)

printed upon the Official Ballot of the aforesaid Party in said District, for the Municipal Primary for the year 20 _____

as a candidate for the Office of _____

(TITLE OF OFFICE)

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	PLACE OF RESIDENCE			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
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20					
21					
22					
23					
24					
25					

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	PLACE OF RESIDENCE			DATE OF SIGNING
		House No.	Street or Road	City, Boro or Twp.	
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					

AFFIDAVIT OF CIRCULATOR

COMMONWEALTH OF PENNSYLVANIA
 SS:
 COUNTY OF _____

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 he or she is a qualified elector duly registered and enrolled as a member of the political party referred to in this petition; that his or her 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 they all reside in the said political district; that each signed on the date set opposite his or her name; and that, to the best of deponent's knowledge and belief, the signers are qualified, registered and enrolled electors of the designated party of the aforesaid political district. (Underlined portion not applicable to Circulator for the office of Magisterial District Judge.)

Sworn (or affirmed) and subscribed before me this
 _____ day of _____, 20 _____

 (OFFICIAL TITLE)

 (SIGNATURE OF CIRCULATOR)

 (PRINTED NAME OF CIRCULATOR)

 (STREET ADDRESS) (POST OFFICE)

My Commission expires _____

 (CITY, BOROUGH OR TOWNSHIP)

NOTE: THIS AFFIDAVIT MUST BE EXECUTED AFTER ALL SIGNATURES HAVE BEEN OBTAINED

WAIVER OF EXPENSE ACCOUNT REPORTING AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA
 SS:
 COUNTY OF _____

Before me, the undersigned authority in and for the said State and County, personally appeared the undersigned, who, being duly sworn according to law, did depose and say that as a candidate, he or she does not intend to form a political committee or to receive contributions or make expenditures in excess of Two Hundred Fifty Dollars (\$250.00) during any reporting period, that, as a candidate, he or she will keep records of contributions and expenditures as required by law, that, as a candidate, he or she will file reports as required by law if contributions or expenditures exceed Two Hundred Fifty Dollars (\$250.00). (Act No. 1980-127)

Sworn (or affirmed) and subscribed before me this
 _____ day of _____, 20 _____.

 (OFFICIAL TITLE)

 (SIGNATURE OF CANDIDATE)

 (PRINTED NAME OF CANDIDATE)

 (STREET ADDRESS) (POST OFFICE)

My Commission Expires: _____

 (CITY, BOROUGH OR TOWNSHIP)