FRANCISCO V. AGUILAR
NEVADA SECRETARY of STATE

101 N Carson Street, Suite 3
Carson City, NV, 89701
775.687.8683

Minor Political Party
Ballot Access Petition
NRS 293.172

Petition to Qualify

_____
(print name of minor party)

County of _____ (Only registered voters of this County may sign below.)
Petition District: _____ (Only registered voters of this petition district may sign below)

			This space for office use only
1	PRINT YOUR NAME (last name, first name, initial) YOUR SIGNATURE: DATE: / /	RESIDENCE ADDRESS ONLY: CITY: ZIP CODE: REGISTRATION COUNTY:	
2	PRINT YOUR NAME (last name, first name, initial) YOUR SIGNATURE: DATE: / /	RESIDENCE ADDRESS ONLY: CITY: ZIP CODE: REGISTRATION COUNTY:	
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[Place affidavit on last page of document]

AFFIDAVIT OF CIRCULATOR

(To be completed by the person who circulated the petition after all signatures have been obtained)

State of Nevada)
)
County of _____)

I,_____, (print name) , being first duly sworn under penalty of perjury, depose and say: (1) that I reside at

_____

(print street, city and state); (2) that I am 18 years of age or older; (3) that I personally circulated this document; (4) that all signatures are genuine and were affixed in my presence; (5) that, according to my best information and belief, each person who signed was at the time of signing a registered voter in the State and county of his or her residence; and (6) that the number of signatures affixed thereon is _____.

_____
Signature of Circulator

Subscribed and sworn to (or affirmed) before me this _____

day of _____, _____, by _____

_____
Notary Public or person authorized to administer an oath