

Major Political Party Ballot Access Petition NRS 293.128

For General Election Ballot Access as a Major Political Party

	(print	name	of mind	or party)		
our	nty of (<u>O</u>	<u>nly</u> regi	stered v	oters of this	County may sign	
1	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:	offi	s space fo
	(11111, 11111, 1111)					
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
		/ /				
2	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
		/ /				
3	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
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	PRINT YOUR NAME (last name, first name, initial)	7 7	RESIDENC	CE ADDRESS ONLY:		
4						
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
		/ /				
5	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
		/ /				

	(print	name	of mind	or party)		
Coun	ty of (<u>O</u> I	nl <u>y</u> regis	stered v	oters of this	County may sign	below.
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6	PRINT YOUR NAME (last name, first name, initial)		RESIDEN	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
7	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
8	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
9	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
10	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	VOLIB SIGNATURE:	DATE:	CITV	ZID CODE:	DECISTRATION COLINITY:	+

	(print	name	of mind	or party)		
Coun	ty of (<u>Or</u>	<u>nly</u> regi:	stered v	oters of this	s County may sign	below.
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11	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
12	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
13	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
14	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
15	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	VOLID SIGNATURE:	DATE:	CITV	ZID CODE:	DECISTRATION COLINITY:	=

	(print	name	of mind	or party)		
Coun	ty of (<u>O</u> I	<u>nly</u> regi:	stered v	oters of this	County may sign	below.
						is space fo ce use only
16	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:	· · · ·	
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	-
		/ /				
17	PRINT YOUR NAME (last name, first name, initial)		RESIDENC	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
18	PRINT YOUR NAME (last name, first name, initial)	/ /	RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
19	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
20	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	

	(print	name	of mind	or party)		
Coun	ty of (<u>O</u> I	<u>nly</u> regi	stered v	oters of this	s County may sign	below.
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21	PRINT YOUR NAME (last name, first name, initial)		RESIDEN	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	_
		/ /				
22	PRINT YOUR NAME (last name, first name, initial)		RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
23	PRINT YOUR NAME (last name, first name, initial)	, ,	RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
24	PRINT YOUR NAME (last name, first name, initial)	, ,	RESIDENO	CE ADDRESS ONLY:		
	YOUR SIGNATURE:	DATE:	CITY:	ZIP CODE:	REGISTRATION COUNTY:	
25	PRINT YOUR NAME (last name, first name, initial)	, ,	RESIDENO	CE ADDRESS ONLY:		
	VOLID SIGNATURE:	DATE:	CITV	ZID CODE:	DECISTRATION COLINTY:	

(print name of minor party)

[Place affidavit on last page of document]

AFFIDAVIT OF CIRCULA	TOR
(To be completed by the person who circulated the petition after all	signatures have been obtained)
State of Nevada)	
County of)	
,	, (print name) , being
first duly sworn under penalty of perjury, depose ar	nd say: (1) that I reside at
(print street, city and state); (2) that I am 18 years personally circulated this document; (4) that all signaffixed in my presence; (5) that, according to my be each person who signed was at the time of signing and county of his or her residence; and (6) that the thereon is	gnatures are genuine and were est information and belief, a registered voter in the State
	Signature of Circulator
Subscribed and sworn to (or affirmed) before me this	_
day of,, by	
Notary Public or person authorized to administer an oath	