



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

Petition to Nominate Candidate
Special Election Petition
NRS 306.110

Petition to Qualify as a Candidate for Special Election

(print name of candidate)

For the Office of _____

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)	RESIDENTIAL ADDRESS ONLY:			
	YOUR SIGNATURE: _____ DATE: ____/____/____	CITY: _____	ZIP CODE: _____	REGISTRATION COUNTY: _____	
2	PRINT YOUR NAME (last name, first name, initial)	RESIDENTIAL ADDRESS ONLY:			
	YOUR SIGNATURE: _____ DATE: ____/____/____	CITY: _____	ZIP CODE: _____	REGISTRATION COUNTY: _____	
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	YOUR SIGNATURE: _____ DATE: ____/____/____	CITY: _____	ZIP CODE: _____	REGISTRATION COUNTY: _____	
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	YOUR SIGNATURE: _____ DATE: ____/____/____	CITY: _____	ZIP CODE: _____	REGISTRATION COUNTY: _____	
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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