

Town of Millington – Election Candidate Nomination Petition

We, the undersigned voters of the Town of Millington, Kent and Queen Anne’s Counties, hereby nominate (Name) _____

(Address) _____, for the office of Council Member, for a term of three (3) year to appear on the 2010 Election ballot.

NOTICE TO SIGNERS: By signing this petition, you agree that the above-named candidate should be placed on the ballot for the office and election indicated and that, to the best of your knowledge, you are registered to vote in the Town of Millington and are eligible to have your signature counted for petition purposes.

	DATE	PRINTED NAME	VOTER REGISTRATION ADDRESS	CITY, ZIP CODE	DATE OF BIRTH	SIGNATURE
1						
2						
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FOR ELECTION BOARD USE ONLY

_____ Total Number of Signatures
 _____ Number of Invalidated Signatures
 _____ Number of Valid Signatures

Endorsed by: _____

_____ Circulator’s Printed Name

_____ Residence Address

_____ Town _____ Zip

_____ Telephone

CIRCULATOR’S AFFIDAVIT

Under penalties of perjury, I swear (or affirm) that: (a) I was at least 18 years old when each signature was obtained; (b) the information given to the left identifying me is true and correct; (c) I personally observed each signer as he or she signed this page; and (d) to the best of my knowledge and belief: (i) all signatures on this page are genuine; and (ii) all signers are registered voters of the Town of Millington.

_____ Circulator’s Signature _____ Date