

Download Nomination Petitions - IMPORTANT NOTICE

Nomination petitions must be printed as duplex (two-sided, front and back) on plain white 8 1/2" x 11" (letter-size) paper. This requirement **cannot** be satisfied by printing each side of the duplex nomination petition on a separate sheet of 8 1/2" x 11" paper and affixing the two sheets together.

THE NOMINATION PETITION FORMS ATTACHED ARE BEING PROVIDED FOR THE PURPOSE OF **SUPPLEMENTING** THE SUPPLY OF NOMINATION PETITIONS THAT YOU RECEIVED FROM THE BUCKS COUNTY BOARD OF ELECTIONS.

THESE FORMS ARE FOR CANDIDATES OF THE REPUBLICAN PARTY AND THE DEMOCRATIC PARTY **ONLY**. **CANDIDATES OF MINOR POLITICAL PARTIES AND POLITICAL BODIES MAY NOT UTILIZE THESE FORMS.**

BEFORE DOWNLOADING OR PRINTING ANY OF THE NOMINATION PETITIONS ON THIS PAGE, PLEASE READ THE FOLLOWING INSTRUCTIONS VERY CAREFULLY. FAILURE TO REPRODUCE THE NOMINATION PETITIONS CORRECTLY MAY RESULT IN THE REJECTION OF THOSE FORMS.

1. All highlighted fields must be completed - type on-screen and print as noted in section 2.
2. Nomination petitions **must** be printed as **duplex** (two-sided, front and back) on **plain white 8 1/2" x 11" (letter size)** paper. This requirement **cannot** be satisfied by printing each side of the duplex nomination petition on a separate sheet of 8 1/2" x 11" paper and affixing the two sheets together.
3. Please read all instructions provided with the nomination petitions prior to circulation.

IF YOU HAVE ANY QUESTIONS OR ARE UNSURE WHETHER YOU HAVE CORRECTLY REPRODUCED ANY OF THE FORMS ON THIS PAGE, PLEASE CONTACT THE BUCKS COUNTY BOARD OF ELECTIONS AT 215-348-6154.

The forms below cannot be altered. Any alteration to the forms may invalidate them.

**IF YOU WOULD LIKE A RECEIPT FOR YOUR NOMINATION PETITION,
PLEASE BRING THIS COMPLETED FORM WITH YOU WHEN YOU FILE. THANK YOU.**

Name: _____

Office: _____

District: _____

Filing Fee (if applicable): _____

**PLEASE BE SURE TO PRINT THE
NEXT TWO PAGES (#'s 3 and 4 of packet)
DOUBLE-SIDED on LETTER-SIZE PAPER**

**YOUR NOMINATION PETITIONS
WILL NOT BE ACCEPTED IF
PRINTED SINGLE-SIDED**

**PLEASE CALL OUR OFFICE
IF YOU HAVE ANY QUESTIONS**

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 Municipal Primary

We, the undersigned, all of whom are qualified electors of _____ County and of _____, and are registered _____
(ELECTORAL DISTRICT IN WHICH THE NOMINATION OR ELECTION IS TO BE MADE)

and enrolled members of the _____ Party or Policy, hereby petition the County Board of Elections of _____ County to have the name of _____, whose
(TYPEWRITE, PRINT OR WRITE PLAINLY THE ABOVE NAME AS YOU WISH IT TO APPEAR ON THE OFFICIAL BALLOT)

Profession, Business or Occupation is _____, Place of Residence is _____,
(WITH STREET, NUMBER (WHERE POSSIBLE) AND ZIP CODE)

be printed upon the Official Ballot of the Aforesaid Party in the said District, for the Municipal Primary for the year _____, as a candidate for the Office of:

_____ for a _____ year term.
(TITLE OF OFFICE)

for office use only please

SIGNERS ARE CAUTIONED TO AVOID THE USE OF DITTO MARKS

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	PLACE OF RESIDENCE			DATE OF SIGNING
		HOUSE NO.	STREET or ROAD	MUNICIPALITY	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

AFFIDAVIT OF CIRCULATOR

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____

SS:

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 members of the designated party of the aforesaid political district.

Sworn to and subscribed before me

this _____ day of _____, 20_____

NOTARY STAMP

(SIGNATURE of CIRCULATOR)

(PRINTED NAME of CIRCULATOR)

(STREET ADDRESS, POST OFFICE and ZIP CODE of CIRCULATOR)

(MUNICIPALITY of CIRCULATOR)

(SIGNATURE of NOTARY)

CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____

SS:

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 his or her residence is as set forth below; that he or she is a qualified elector duly registered and enrolled as a member of the political party and of the political district referred to in this petition; that the name of the office for which he or she consents to be a candidate is:

(TITLE OF OFFICE and LENGTH OF TERM)

that he or she is eligible for said office; that he or she will not knowingly violate any election law, and prohibiting corrupt practices in connection therewith.

Sworn to and subscribed before me

this _____ day of _____, 20_____

NOTARY STAMP

(SIGNATURE of CANDIDATE)

(PRINTED NAME of CANDIDATE)

(STREET ADDRESS, POST OFFICE and ZIP CODE of CANDIDATE)

(MUNICIPALITY and ELECTION DISTRICT of CANDIDATE)

(SIGNATURE of NOTARY)

(TELEPHONE NUMBER and E-MAIL ADDRESS of CANDIDATE)

This nomination petition is to be used by candidates for an ELECTION OFFICE ONLY (i.e. Judge of Elections or Inspector of Elections) and may not be used by candidates for Public Office or for Party Office.

Party _____
Office of _____
Election District _____
Term _____ years

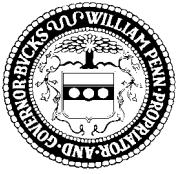
PETITION

To Have Name of

(Write or print name plainly as you wish it to appear on ballot)

As Candidate Printed on the Official Ballot of the Above Named Party, District and Office for the **MUNICIPAL PRIMARY for the Year 2017**

for office use only please



BUCKS COUNTY BOARD OF ELECTIONS

INSTRUCTIONS FOR CIRCULATING NOMINATION PETITIONS FOR JUDGE OF ELECTIONS AND INSPECTOR OF ELECTIONS

MUNICIPAL PRIMARY – MAY 16, 2017 MUNICIPAL ELECTION - NOVEMBER 7, 2017

FIRST DAY TO CIRCULATE AND FILE NOMINATION PETITIONS -----FEBRUARY 14

LAST DAY TO CIRCULATE AND FILE NOMINATION PETITIONS -----MARCH 7

1. PRIOR TO CIRCULATION (OBTAINING YOUR SIGNATURES)

- A. ALL BLANK SPACES IN THE TOP OF THE PETITION MUST BE COMPLETED BEFORE SIGNATURES ARE OBTAINED. TYPE OR PRINT THE NAME OF THE CANDIDATE ON THE PETITION **EXACTLY AS THE CANDIDATE WANTS IT TO APPEAR ON THE BALLOT**. GIVEN NAMES MUST BE USED. TITLES SUCH AS DR., MR./MRS., ETC. ARE NOT PERMITTED. A NICKNAME IS PERMITTED ONLY IF IT IS A DERIVATIVE OF THE LEGAL GIVEN NAME.

BE SURE THAT THE PROPER PARTY, OFFICE TITLE, MUNICIPALITY, WARD AND/OR DISTRICT (IF APPLICABLE) AND LENGTH OF TERM (4 YEARS) IS SET FORTH ON THE BACK OF THE PETITION.

- B. THE CIRCULATOR MAY BE THE CANDIDATE OR A QUALIFIED ELECTOR DULY REGISTERED AND ENROLLED AS A MEMBER OF THE POLITICAL PARTY REFERRED TO IN THE PETITION.
- C. THE STATUTORY REQUIREMENT, 25 P.S. § 2869, THAT REQUIRES THE CIRCULATOR OF A NOMINATION PETITION TO BE A RESIDENT OF THE RELEVANT POLITICAL DISTRICT NAMED IN THE PETITION WILL NOT BE ENFORCED PURSUANT TO ADVICE RECEIVED FROM THE PENNSYLVANIA OFFICE OF THE ATTORNEY GENERAL IN VILLA V. AICHELE, NO. 13-CV-06374 (E.D. PA. 2013).

PLEASE NOTE THAT WHILE THE BUCKS COUNTY BOARD OF ELECTIONS WILL NOT REJECT NOMINATION PETITIONS ON THE BASIS THAT THE CIRCULATOR DOES NOT RESIDE IN THE DISTRICT SPECIFIED IN THE NOMINATION PETITION, CANDIDATES SHOULD BE AWARE THAT THEIR NOMINATION PETITION MAY BE CHALLENGED IN THE COURT OF COMMON PLEAS ON THE BASIS THAT THE CIRCULATOR DOES NOT RESIDE IN THE DISTRICT.

2. SIGNERS

- A. EACH SIGNER FOR JUDGE OF ELECTIONS MAY ONLY SIGN ONE PETITION. A MINIMUM OF TEN (10) SIGNATURES IS REQUIRED. IT IS RECOMMENDED THAT YOU OBTAIN MORE THAN THE MINIMUM.

EACH SIGNER FOR INSPECTOR OF ELECTIONS MAY ONLY SIGN ONE PETITION. A MINIMUM OF FIVE (5) SIGNATURES IS REQUIRED. IT IS RECOMMENDED THAT YOU OBTAIN MORE THAN THE MINIMUM.

- B. EACH SIGNER OF A PETITION MUST BE A REGISTERED AND ENROLLED ELECTOR OF THE POLITICAL DISTRICT AND POLITICAL PARTY REFERRED TO IN THE PETITION. REPUBLICAN ELECTORS MUST SIGN REPUBLICAN PETITIONS. DEMOCRATIC ELECTORS MUST SIGN DEMOCRATIC PETITIONS.

- C. EACH SIGNER MUST PERSONALLY SIGN AND INSERT THEIR OWN INFORMATION ON THE PETITION. THEY MUST LIST THEIR ADDRESS EXACTLY AS IT APPEARS ON THEIR VOTER REGISTRATION RECORD. THE DATE OF SIGNING MAY BE EXPRESSED IN WORDS OR NUMBERS -- FEBRUARY 14, 2017 OR 02/14/17. GIVEN NAMES MUST BE USED BY SIGNERS. TITLES SUCH AS DR., MR. OR MRS., ETC. ARE NOT PERMITTED.
- D. ***DITTO MARKS ARE NOT PERMITTED.***

3. **AFFIDAVITS**

- A. THE *AFFIDAVIT OF CIRCULATOR* ON THE BACK OF THE PETITION MUST BE SIGNED BY THE CIRCULATOR AND NOTARIZED **AFTER** OBTAINING THE REQUIRED SIGNATURES.
- B. THE *CANDIDATE'S AFFIDAVIT AND LOYALTY OATH* ON THE BACK OF THE PETITION MUST BE SIGNED BY THE CANDIDATE AND NOTARIZED.
- C. EACH NOTARIZATION MUST INCLUDE THE NOTARY'S OFFICIAL INKED STAMP.
- D. THE *WAIVER OF EXPENSE ACCOUNT REPORTING AFFIDAVIT* IS NOT REQUIRED.

4. **FILING**

- A. **ALL PETITIONS MUST BE FILED IN THE OFFICE OF THE BUCKS COUNTY BOARD OF ELECTIONS NO LATER THAN 5:00 P.M. ON MARCH 7, 2017. THERE IS NO FILING FEE.**
- B. THE STATEMENT OF FINANCIAL INTEREST IS NOT REQUIRED FOR JUDGE OF ELECTIONS AND/OR INSPECTOR OF ELECTIONS.

**If you have any questions, please contact our office at:
Bucks County Board of Elections
55 East Court Street
Doylestown, Pennsylvania
18901
215-348-6154**