

ATTENTION VOTERS: Before signing, read signer information on other side.

candidate

ATTENTION REGISTRARS: Before certifying signatures, see Instructions to Registrars below.

office

	CHECK	I SIGNATURES to be made in person with name substantially as registered (except in case of physical disability as stated above)	II NOW REGISTERED AT (street, number and apartment number, if any) (town will be the same as stated above)	PRECINCT
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COMMITTEE TO FILL VACANCIES: (Candidate MAY list here the names and addresses of five registered voters of the town, who may fill any vacancy caused by the candidate’s death or physical disability.)

COMMITTEE OF FIVE REGISTERED VOTERS: NAME AND RESIDENCE (Street and Number, if any; Town)

WARNING – criminal penalty for unlawfully signing, altering, defacing, mutilating, destroying or suppressing this petition: fine of up to \$1,000 or imprisonment for up to one year.

REGISTRAR
INFORMATION

- INSTRUCTIONS TO REGISTRARS
- You must time-stamp or write in date and time these papers are received.
 - Fill in and sign Certificate of Registration on at least one of the candidate’s papers.
 - Check thus ✓ against the name of each qualified voter to be certified. For names not certified use the following code. Draw a line through any blank spaces not containing signatures.
- N - no such registered voter at that address, or address is illegible
- S - unable to identify signature as that of voter because of form of signature, or signature is illegible
- T - already signed nomination papers for this candidate

CANDIDATE CERTIFICATE OF REGISTRATION

We hereby certify that the above named candidate is a registered voter of this town.

_____ 20 _____

Registrars of Voters of _____
Town

CERTIFICATION OF NAMES

At least three registrars’ names must be signed or stamped below.

_____ month and day

We certify that _____
number of names certified – use numbers and words

above signatures checked thus ✓ are the names of qualified voters from this town.

Registrars of Voters of _____
Town