

State of Maine

Presidential Primary Petition March 5, 2024

DATE FILED
With Secretary of State

______ *Party*

Legal name of candidate as it will appear on the ballot: (See Title 21-A, $\S601(2)(H)$ for requirements.)					
(Last name and suffix, if any)	(First name)	(Middle name or initial)			
oting Residence Address of Candidate:					
	(City/Town)	(State)			
Nailing Address of Candidate:					

Petition must be submitted to municipal registrar for certification prior to filing with Secretary of State.

Deadline for submitting petitions to municipal registrar for certification: 5 p.m., November 20, 2023

Deadline for filing petitions and Candidate's Consent with Secretary of State: 5 p.m., December 1, 2023

- Every voter must sign the petition in the circulator's presence.
- Registered voters physically unable to sign, who have filed an alternative signature statement per 21-A MRS §153-A, may direct another Maine registered voter to sign the petition in their presence. The authorized individual must sign their name, the assisted voter's name, attest to signing on the voter's behalf, and complete all information on both lines (for the voter and the assistant).
- For more information, please contact the Division of Elections at (207) 624-7650.

For Registrar use only	Signature of Voter (Not Printed Name)	Printed Name of Voter (Not Signature)	Date Signed	Actual Street Address (Not P.O. Box)	Municipality (Where Registered)
1.					
2.					
3.					
4.					
5.					
6.					
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9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

For Registrar use only	Signature of Voter (Not Printed Name)	Printed Name of Voter (Not Signature)	Date Signed	Actual Street Address (Not P.O. Box)	Municipality (Where Registered		
21.							
22.							
23.							
24.							
25.							
26.							
27.							
28.							
29.							
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39.							
40.							
petition be, and in the p	n; and, to the best of my kno l each person is enrolled in t	wledge and belief, each sign he party named on this petit able to sign due to a physica	at I perso ature is tl ion, and i l disabilit	onally witnessed all of the signat hat of the person whose name it is a resident of the electoral divi ty, I hereby verify, that the vote 's presence	purports to sion named		
	re of Circulator			e of Circulator			
Signatu	ure of Notary	Prin	ted Name	of Notary			
Subscrib	oed to and sworn before me on this	date: (Date must be completed by !	Notary)	Date my Notary Commission expires: _			
		Registrar's Cer	tification	1			
Munici	pality	TOTAL V	VALID	TOTAL INVALII	D		
		_		er on the voting list as registered			
DATE	& TIME PETITION RECEIVED:	Signature of Registra	r:				
	Date petition certified:						