

COVER SHEET FOR DESIGNATING AND INDEPENDENT PETITION

\_\_\_\_\_  
PLACE NAME OF PARTY OR INDEPENDENT BODY HERE

Name of Candidate	Residence Address (Include Mailing Address if Different)	Public Office /Party Position (Include district number where appropriate)

Volume Number	
Total Number of Volumes in Petition	

The petition contains the number, or in excess of the number, of valid signatures by Election Law.

**Contact Person to Correct Deficiencies:**

Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_  
*(Also include mailing address if different)*

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
*(Include if notice by fax desired)*

Email: \_\_\_\_\_  
*(Include in notice by email desired)*

I hereby authorize that any notice of any determination made by the Board of Elections be transmitted to the person named above.

\_\_\_\_\_  
Signature of Candidate of Agent

***Optional: For candidates for statewide office, Member of Assembly or State Senator only.***

The following website address is submitted to be published on the State Board of Elections website pursuant to section 4-123 of the Election Law for the candidate listed opposite:

Name of Candidate	Website Address