



NOMINATING PETITION STATE OF LOUISIANA

QUESTIONS? - Call the Secretary of State at
1-800-883-2805 or (225) 922-0900.



FOR THE PRESIDENTIAL PREFERENCE PRIMARY ELECTION (in lieu of qualifying fees)

We, the undersigned qualified voters of the **Parish of** _____ in the _____ **Congressional District**, state of Louisiana,
(Parish Name) (Congressional District #)

in accordance with the provisions of the applicable laws of the state of Louisiana, make the following nomination to be voted for at the Presidential Preference Primary

Election to be held throughout the State of Louisiana on the: _____ day of _____, _____
(Day) (Month) (Year)

PRINT OR TYPE THE FOLLOWING INFORMATION BELOW:

| Name of Candidate as it will appear on the Ballot | Political Party of Candidate | Address of Domicile |
|---|------------------------------|---------------------|
| | | |

Instructions: Voter signatures **SHALL** be obtained **no earlier than 120 days before** the qualifying period opens for candidates. A nominating petition **SHALL** be submitted to the Registrar of Voters in the Parishes where the signers reside **no less than 30 days before** the qualifying period ends for candidates in the primary election pursuant to La. R.S. 18: 1280.22. The Registrar of Voters for each parish **SHALL** endorse the **date and time of receipt** of the nominating petition in the space provided below, whether original or supplemental:

NOTE: Each nominating petition should be circulated by one person who must execute the circulator's certificate. Also, each nominating petition should be signed by petitioners who reside in the same parish and Congressional District to be certified by the registrar of voters for such parish.

| | |
|---|------------------------|
| OFFICIAL USE ONLY | Original Supplement |
| RECEIVED IN THE OFFICE OF THE REGISTRAR OF VOTERS THIS | |
| _____ day of _____, _____ at _____ o'clock _____ a.m. _____ p.m. <input checked="" type="checkbox"/> <small>(Day) (Month) (Year) (Time) (Check One) Signature of the person at ROV that took possession of this petition</small> | |

Candidate Information:

Name: Office: Party: Address:

Primary Date:

CERTIFICATE BY PERSON(S) WHO OBTAINED SIGNATURES

I (We) hereby certify on the ___ day of ___, ___ that to the best of our knowledge, information and belief all of the signatures on the nominating petition are genuine and all of the statements contained in the nominating petition are true and correct.

Signature lines with checkboxes and labels: (Signature)

REGISTRAR OF VOTERS CERTIFICATION

I hereby certify on the ___ day of ___, ___ that this nominating petition contains ___ signatures of qualified voters of the ___ Congressional District who are affiliated with the same political party as the candidate for whom this nomination is made and who provided residence addresses and timely signed the nominating petition.

Registrar of Voters Parish of _____

Prepared By LOUISIANA SECRETARY OF STATE

