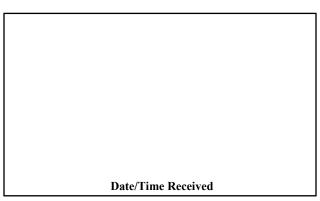
Each signer may sign petitions for as many candidates for each office as he can vote for, and no more.

Commonwealth of Pennsylvania Nomination Petition

To have Name of Candidate Printed upon the **Official Ballot for the Primary Election**



We, the undersigned, all of w	hom are qualified electors of	f O	Cumberland	County and
€(Elec	Carlisle Area School Bo	and are registered and		
enrolled members of the 9		Democratic		Party or Policy, hereby
petition the County Board of	Elections of O	Cumb	erland	County
to have the name of $\boldsymbol{\Theta}$	(Type, print, or write plainly the n	Sue Bower name as you wish it to appear	on the Official Ballot)	, whose Profession,
Business, or Occupation is G		parent	·	and whose Place of
	27 Drickly Door	Drive Carliele PA 1	7102	

27 Prickly Pear Drive, Carlisle, PA 17103 Residence is **7** (With street, number [where possible], and zip code)

printed upon the Official Ballot of the aforesaid Party in said District, for the Municipal Primary for the year 2025 as a

candidate for the Office of	School Director	Θ	4-year
	(Title of office)		(Term of office)

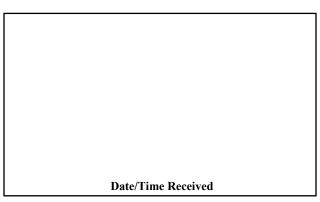
Signature of Elector	Printed Name of Elector	Address Where Registered and Enrolled			Date of
Signature of Elector	T finited Name of Elector	House No.	Street or Road	Boro. or Township	Signing
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designated in this Nomination the same with full knowledge set opposite his or her name; a members of the political part below. (Underlined portion no Further, I state that the inform	elector of the Commonwealth; \underline{tt} <u>a Petition</u> ; that my residence is as s of the contents thereof; that their re and that to the best of my knowled by and of the political district desi- ot applicable to a circulator for the co- mation set forth herein is true and the penalties of 18 Pa.C.S. § 4904 (r	hat I am duly et forth below espective resid ge and belief, gnated in this office of Magis	registered and enrolled a ; that the signers to the for ences are correctly stated t the signers are qualified el petition, and that they ar sterial District Judge.) best of my knowledge, in	egoing Nomination Pe herein; that each signed ectors, duly registered e residents of the cour formation, and belief,	tition signed d on the date and enrolled nty specified
1 (County of Petition Signers' Residence 2 (Signature of Circulator)	- · · · ·			, , , , , , , , , , , , , , , , , , ,	
5(Borough or Township)	(i osi Onice)				

Each signer may sign petitions for as many candidates for each office as he can vote for, and no more.

Commonwealth of Pennsylvania Nomination Petition

To have Name of Candidate Printed upon the Official Ballot for the Primary Election



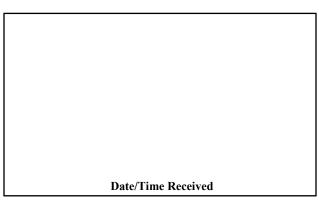
We, the undersigned, all of whom are qualified electors of ${\ensuremath{\bullet}}\ _$			Cumberlar	ld	County and	
0	Carlisle Area Scho	ol Board			and are re	gistered and
(Ele	ctoral district in which the nomir	nation or elec	tion is to be mad	le)		
enrolled members of the $\boldsymbol{\Theta}_{-}$		Dem	ocratic		Party or Po	olicy, hereby
petition the County Board of	Elections of 4		(Cumberland		County
to have the name of G					, whose	Profession,
				appear on the Official Ballot)		
Business, or Occupation is G		eng	jineer		and wh	ose Place of
Residence is @	1035 W. S	outh Stre	et, Carlisle	, PA 17013		2
	(Wit	h street, num	ber [where poss	ible], and zip code)		
printed upon the Official Bal	lot of the aforesaid Part	y in said l	District, for	the Municipal Primary f	for the year 20 <u>25</u>	as a
candidate for the Office of 3	School Direc	tor		9	4-year	
	(Title of office)				4-year (Term of office)	`
Signature of Elector	Printed Name of Ele	ator	Address Where Registered a		and Enrolled	Date of
Signature of Elector	Frinted Name of ER	ector	House No.	Street or Road	Boro. or Township	Signing
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Signature of Elector	Printed Name of Elector	Ad House No.	dress Where Registered a Street or Road	and Enrolled Boro. or Township	Date of Signing
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designated in this Nomination the same with full knowledge set opposite his or her name; a members of the political part below. (Underlined portion no Further, I state that the inform	elector of the Commonwealth; \underline{tt} <u>a Petition</u> ; that my residence is as s of the contents thereof; that their re and that to the best of my knowled by and of the political district desi- ot applicable to a circulator for the co- mation set forth herein is true and the penalties of 18 Pa.C.S. § 4904 (r	hat I am duly et forth below espective resid ge and belief, gnated in this office of Magis	registered and enrolled a ; that the signers to the for ences are correctly stated t the signers are qualified el petition, and that they ar sterial District Judge.) best of my knowledge, in	egoing Nomination Pe herein; that each signed ectors, duly registered e residents of the cour formation, and belief,	tition signed d on the date and enrolled nty specified
1 (County of Petition Signers' Residence 2 (Signature of Circulator)	- · · · ·			, , , , , , , , , , , , , , , , , , ,	
5(Borough or Township)	(i osi Onice)				

Each signer may sign petitions for as many candidates for each office as he can vote for, and no more.

Commonwealth of Pennsylvania Nomination Petition

To have Name of Candidate Printed upon the Official Ballot for the Primary Election



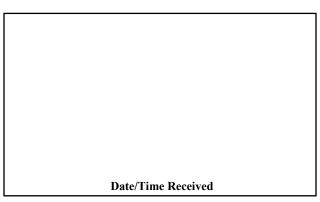
We, the undersigned, all of whom are qualified electors of \bullet _			Cumberla	nd	County and	
0	Carlisle Area Sch				and are re	gistered and
× ×	ctoral district in which the nor			·		
enrolled members of the $\boldsymbol{S}_{_}$		Democ	cratic		Party or Po	olicy, hereby
petition the County Board of	Elections of 9		(Cumberland		County
to have the name of §		Anne La	uritzen		, whose	Profession,
	(Type, print, or write pl	ainly the name as y	ou wish it to	appear on the Official Ballot)		
Business, or Occupation is G					and wh	ose Place of
Residence is O	16 N. T	hrush Drive,	Carlisle,	PA 17015		,
printed upon the Official Ball	lot of the aforesaid Pa	rty in said Di	strict, for	the Municipal Primary	for the year 20 <u>25</u>	as a
candidate for the Office of 3	School Dire			Ø	4-year (Term of office)	
	(Title of offic	ce)			(Term of office)	
Signature of Elector	A Printed Name of Elector		Ado	dress Where Registered and Enrolled		Date of
Signature of Elector	Frinted Ivalle of F	H	Iouse No.	Street or Road	Boro. or Township	Signing
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Signature of Elector	Printed Name of Elector	Ad House No.	dress Where Registered a Street or Road	and Enrolled Boro. or Township	Date of Signing
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designated in this Nomination the same with full knowledge set opposite his or her name; a members of the political part below. (Underlined portion no Further, I state that the inform	elector of the Commonwealth; \underline{tt} <u>a Petition</u> ; that my residence is as s of the contents thereof; that their re and that to the best of my knowled by and of the political district desi- ot applicable to a circulator for the co- mation set forth herein is true and the penalties of 18 Pa.C.S. § 4904 (r	hat I am duly et forth below espective resid ge and belief, gnated in this office of Magis	registered and enrolled a ; that the signers to the for ences are correctly stated t the signers are qualified el petition, and that they ar sterial District Judge.) best of my knowledge, in	egoing Nomination Pe herein; that each signed ectors, duly registered e residents of the cour formation, and belief,	tition signed d on the date and enrolled nty specified
1 (County of Petition Signers' Residence 2 (Signature of Circulator)	- · · · ·			, , , , , , , , , , , , , , , , , , ,	
5(Borough or Township)	(i osi Onice)				

Each signer may sign petitions for as many candidates for each office as he can vote for, and no more.

Commonwealth of Pennsylvania Nomination Petition

To have Name of Candidate Printed upon the Official Ballot for the Primary Election



We, the undersigned, all of whom are qualified electors of **O** Cumberland County and Carlisle Area School Board (Electoral district in which the nomination or election is to be made) _____ and are registered and enrolled members of the
Democratic Party or Policy, hereby
Party or Policy, hereby petition the County Board of Elections of @_____ Cumberland County to have the name of **9**______, whose Profession, (Type, print, or write plainly the name as you wish it to appear on the Official Ballot) Business, or Occupation is **6**_____ parent and whose Place of Residence is (With street, number [where possible], and zip code) printed upon the Official Ballot of the aforesaid Party in said District, for the Municipal Primary for the year 2025 as a candidate for the Office of
School Director 4-year
 (Term of office) _____· (Title of office) Address Where Registered and Enrolled Date of **Signature of Elector Printed Name of Elector** Signing House No. Street or Road Boro. or Township 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.

Signature of Elector	Printed Name of Elector	Ad House No.	dress Where Registered a Street or Road	and Enrolled Boro. or Township	Date of Signing
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designated in this Nomination the same with full knowledge set opposite his or her name; a members of the political part below. (Underlined portion no Further, I state that the inform	elector of the Commonwealth; \underline{tt} <u>a Petition</u> ; that my residence is as s of the contents thereof; that their re and that to the best of my knowled by and of the political district desi- ot applicable to a circulator for the co- mation set forth herein is true and the penalties of 18 Pa.C.S. § 4904 (r	hat I am duly et forth below espective resid ge and belief, gnated in this office of Magis	registered and enrolled a ; that the signers to the for ences are correctly stated t the signers are qualified el petition, and that they ar sterial District Judge.) best of my knowledge, in	egoing Nomination Pe herein; that each signed ectors, duly registered e residents of the cour formation, and belief,	tition signed d on the date and enrolled nty specified
1 (County of Petition Signers' Residence 2 (Signature of Circulator)	• • • •			, , , , , , , , , , , , , , , , , , ,	
5(Borough or Township)	(i osi Onice)				