

Signatures must be procured within the legal period for securing same: and this Petition must be filed in the office of the County Board of Elections on or before the last day prescribed by law.

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

Date/Time Received

We, the undersigned, all of whom are qualified electors of ❶ Cumberland County and
 ❷ Carlisle Area School Board and are registered and
(Electoral district in which the nomination or election is to be made)
 enrolled members of the ❸ Democratic Party or Policy, hereby
 petition the County Board of Elections of ❹ Cumberland County
 to have the name of ❺ Sue Bower, whose Profession,
(Type, print, or write plainly the name as you wish it to appear on the Official Ballot)
 Business, or Occupation is ❻ parent and whose Place of
 Residence is ❼ 27 Prickly Pear Drive, Carlisle, PA 17103,
(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 ❸ School Director ❹ 4-year.
(Title of office) (Term of office)

Signature of Elector	Printed Name of Elector	Address Where Registered and Enrolled			Date of Signing
		House No.	Street or Road	Boro. or Township	
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Statement of Circulator

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this Nomination Petition; that my residence is as set forth below; that the signers to the foregoing Nomination Petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; and that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents of the county specified below. (Underlined portion not applicable to a circulator for the office of Magisterial District Judge.)

Further, I state that the information set forth herein is true and correct to the best of my knowledge, information, and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).

1 _____
 (County of Petition Signers' Residence)

2 _____
 (Signature of Circulator)

3 _____
 (Printed Name of Circulator)

4 _____
 (Street Address) (Post Office)

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 (Borough or Township)

The Statement of Circulator must be executed after all signatures have been obtained.

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