

It is a felony for anyone to sign any petition for the nomination of an independent candidate with any name other than his or her own, or knowingly to sign his or her name more than once to the same petition, or to sign a petition when he or she knows he or she is not a registered voter. Signing this petition does not obligate you to vote for any candidate or party.

**PETITION FOR THE NOMINATION OF AN INDEPENDENT CANDIDATE**

To the Honorable \_\_\_\_\_ for \_\_\_\_\_:  
(title of official with whom petition is to be filed) (the state of Missouri or appropriate county)

We, the undersigned, citizens and registered voters of the state of Missouri, \_\_\_\_\_ County and \_\_\_\_\_, nominate \_\_\_\_\_, residing at \_\_\_\_\_, as an  
(district, if appropriate) (name of independent candidate) (address of candidate)

independent candidate for \_\_\_\_\_ and respectfully order that the name of  
(name of public office for which candidate is to be nominated)

\_\_\_\_\_ be placed on the ballot, for election or rejection to such office at the next election,  
(name of candidate)

to be held on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, and each for himself or herself says: I have personally signed this petition, I am a registered voter of the state of Missouri, \_\_\_\_\_ County and \_\_\_\_\_; my registered voting address and the name of the city, town or village in which I live are correctly  
(district, if appropriate)

written after my name.

**CIRCULATOR'S AFFIDAVIT**

STATE OF MISSOURI, COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a resident of the state of Missouri, being first duly sworn, say (print or type names of signers)

	NAME (Signature)	DATE SIGNED	REGISTERED VOTING ADDRESS (Street) (City, Town or Village)	ZIP CODE	CONG. DIST.	NAME (Printed or Typed)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

signed this page of the foregoing petition, and each of them signed his or her name thereto in my presence, I believe that each has stated his or her name, registered voting address and city, town or village correctly, and that each signer is a registered voter of the state of Missouri and \_\_\_\_\_ County.

\_\_\_\_\_  
Signature of Affiant  
(Person obtaining signatures)

\_\_\_\_\_  
Address of Affiant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary

Notary Public (Seal)

My commission expires \_\_\_\_\_