STATE OF WEST VIRGINIA MINOR PARTY OR INDEPENDENT CANDIDATE NOMINATION PETITION

		for the _	Genera	l Election		
		State of West Virgin	nia, County of			
Name:	This is to certify that we, the undersigned, are registered voters of the jurisdiction of the office each candidate named below is seeking.			County, who reside within		
Residence:						
Party:						
Office:	By com	npleting this form the above named ca	ndidates are stating tha	at they are legally qualified to hold such office.		
a.		N (D1)	51.1.5			ty Use
Signature	e	Name (Print)	Birth Date	Street Address	VLD	INV
1						
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4						
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8						
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10						
Off: -: -1 f F	2/I1 l 4l Off:f 4l C-	constant of State (WV Code \$2.5.22)		TOTAL VALID CICNATUDEC.		

Official form P-3/Issued by the Office of the Secretary of State (WV Code §3-5-23)

TOTAL VALID SIGNATURES:

Revised 10/13