

STATE BOARD OF ELECTIONS

DATA ENTRY CARD FOR INDEPENDENT & NEW PARTY

PLEASE PRINT name as it appears on the petition & statement of candidacy

NAME: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

Campaign Website Address (optional): www. _____

SLATE: If more than one candidate is listed on the petition, name of first candidate (HEAD OF SLATE) _____

OFFICE: _____ U. S. SENATE
_____ GOVERNOR / LIEUTENANT GOVERNOR
_____ ATTORNEY GENERAL
_____ SECRETARY OF STATE
_____ COMPTROLLER
_____ TREASURER
_____ CONGRESS _____ DISTRICT
_____ LEGISLATIVE (SENATE) _____ DISTRICT
_____ REPRESENTATIVE _____ DISTRICT
_____ SUPERINTENDENT OF SCHOOLS

_____ COUNTIES
_____ CERTIFICATE OF QUALIFICATIONS
(non-incumbent superintendent candidates only)

_____ INDEPENDENT

NEW PARTY: _____

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OFFICE USE ONLY

FILING DATE: _____

TIME: _____

STATEMENT OF CANDIDACY Y or N

HOW FILED: C - CANDIDATE

LOYALTY OATH Y or N

A - AGENT

ECONOMIC INTEREST Y or N

M - MAIL

LAST PAGE NUMBER _____

CODER INITIALS _____