

| For Committ | For Committee Use Only | | | | | | | |
|-------------|------------------------|--|--|--|--|--|--|--|
| | | | | | | | | |

2021 SPECIAL ELECTION NOMINATING PETITION - OCTOBER 2021

| We the undersigned, hereby nor | minate: | | | | - | | 1 | | | | |
|--|--|---------------------|--------------------|------------|--------|-----------|--------|--------|----------|---------|----------|
| | | | | _ | | | _ | | | | |
| Print Candidate's Name | | Petition ID Number* | | | | | | | | | |
| For the position of: | 40 | | | D0 | 00 | 0 | | | | | |
| EXECUTIVE BOARD MEM | | DOCCS | | | | | | | | | |
| Description of Sect. Hele Creek Main | Seat# | udoon (100E | 0 1016 | _ | cy Nam | | 270\ | | | | |
| Description of Seat: Hale Creek, Main | Office, Greene, Coxsackie, F | uuson (1065 | 0, 1016 | 00, 10070 |), 101 | 30, 10 | 270) | | | | |
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| | 50 | | | | | | | | | | |
| Number of valid signatures needed: | | | | | | | | | | | |
| *All nominating petitions will require | e the signature, printed nam | e, and the c | orrect | Petition | I.D. 7 | he Pe | tition | ID nι | ımber | cons | ists |
| of up to the first four letters of your firs | | letters of you | ır last r | name EX | ACTL | Y AS 7 | THEY | APPE | EAR O | N YC |)UR |
| PAYCHECK and the first five numbers | or your nome zip code. | | | | | | | | | | |
| SIGNATURE | PRINT FIRST AND LAST | NAME | PETITION ID NUMBER | | | | | | | | |
| | TRINTTINOT AND EAST | IVAIVIL | | <u> </u> | | | | | | | T |
| 1. | | | | + - | | | - | | | + | - |
| 2. | | | | | | | - | | | + | + |
| 3. | | | | + | | | _ | - | | + | \vdash |
| 4. | | | | | | | - | - | \vdash | + | \vdash |
| 5. | | | | - | | | - | - | | + | - |
| 6. | | | | | | | - | - | | + | - |
| 7. | | | | | | | - | - | | _ | _ |
| 8. | | | | | | | - | - | | \perp | _ |
| 9. | | | | | | | - | | | \bot | _ |
| 10. | | | | | | | - | - | | | |
| 11. | | | | | | | - | - | | | |
| 12. | | | | | | | | - | | | |
| I certify that, 1) I am a regular member of PEF; | 2) I personally circulated this petition | n: and 3) to the | hest of | mv knowle | edae a | ll of the | ahove | are PF | F mem | hers | |
| eligible to sign petitions for the above office. petition invalid. Handwritten signature only | Please print name, Petition ID nu | ımber, date aı | nd sign | clearly. F | ailure | to fill | in all | ields | will de | em | |
| petition invalid. Handwritten Signature Uniy | , uigitai signature not accepteu. | | | | | | | | | | |
| Print Name | | Signature | | | | | | | | | |
| Resition ID Number | | | | Δ- | 4 | | | | | | |
| Petition ID Number | | | | Da | re | | | | | | |