## Virginia Petition of Qualified Voters

Cand		Candidate Ballot Name: Amanda Freeman Chase							
Information		Full Residence Address (including city/state/zip): 2023 Church Street, Appomattox, VA 24522							
		Office Sought: Governor District: State							
		Congressional District (optional):							
Note	to	Review Instructions on page 3.							
Circulator		• The Circulator Affidavit on the reverse side <b>must</b> be completed and signed <b>in front of</b> a Notary.							
Petition		We, the qualified voters of the district in which the above candidate seeks nomination or election and of							
Signer Statement		County/City/Town							
		named individual to become a candidate for the office stated above in the (check only one)							
		General Election Special Election Democratic Primary	Republican Prim						
		to be held on the <u>17</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.	<u>, 20</u> 25	,					
Note to		Your signature on this petition must be your own and does not signify an intent to vote for the candidate.							
Petition		<ul> <li>You may sign petitions for more than one candidate.</li> <li>Privacy notice:</li> </ul>	You may sign petitions for more than one candidate.     Privacy notice:						
Signe	er	• Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.							
		<ul> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul>							
		• Fraud notice: Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and							
		be punishable as a Class 5 felony.							
Office			Date Signed (Must be on or	Last 4 Digits					
Use Only	#	Petition Signer	after January 1st of election year.)	of SSN (optional)					
				(1)					
		Print Full Name Signature							
	1.								
		Full Residential Address (including city/state/zip) (PO Box <b>not</b> acceptable)							
	2.	Print Full Name Signature							
Full Residential Address (including city/state/zip) (PO Box not acceptable)									
	3.	Print Full Name Signature							
		Full Residential Address (including city/state/zip) (PO Box <b>not</b> acceptable)							
		Print Full Name Signature							
	4.								
		Full Residential Address (including city/state/zip) (PO Box <b>not</b> acceptable)							
	II								
	5.	Print Full Name Signature							
		Full Residential Address (including city/state/zip) (PO Box not acceptable)							
	6.	Print Full Name Signature							
	Full Residential Address (including city/state/zip) (PO Box <b>not</b> acceptable)								

## Virginia Petition of Qualified Voters (continued from reverse side)

Candida	ate Bal	lot Name: Amanda Freeman Chase	Office Sough	nt: Governor				
Note to Petition Signer		<ul> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li>Privacy notice:         <ul> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li>Fraud notice: Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>						
Office Use Only	#	Petition S	igner		Date Signed (Must be on or after January 1st of election year.)	Last 4 Digits of SSN (optional)		
	7.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box <b>not</b> acc	ceptable)					
	8.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box not acc	ceptable)					
	9.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box not acc	ceptable)					
	10.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box <b>not</b> acc	ceptable)					
	11.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box not acc	ceptable)					
	12.	Print Full Name	Signature					
		Full Residential Address (including city/state/zip) (PO Box not acc	ceptable)					
Circulator Affidavit		I,						
Nota	ry	State of County/City of						
		The foregoing instrument was subscribed and sworn before the structure of	fore me this	day of	, 20			
		Notary Signature	Registration #		Commission Expira	tion		
		Notary Signature	Registration #		commission Expira	uon		
				Place Photographically	\			

or

Place photographically Reproducible Stamp/Seal Here

Reproducible

Seal/Stamp Here

## **Virginia Petition of Qualified Voters Instructions**

Printing	• The Petition is a two sided document (front and back) that <b>must</b> be printed on <b>one</b> piece of 8 1/2" by 11" paper. The front of the petition contains line numbers 1 through 6; the back contains line numbers 7 through 12, followed by the Circulator Affidavit. <b>If the front and back are on two separate pieces of paper, the petition will</b> <u>not</u> be accepted.
	• This form is in color but may be printed in black and white or greyscale.
	This instruction page does not have to be printed/submitted.
	<ul> <li>If you are unable to print or reproduce this form on one piece of 8 1/2" x 11" paper, call the Department of Elections at 800-552-9745 or 804-864-8901 and we will be glad to send you a form.</li> </ul>
Circulator	• When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.
	• The "Candidate Information" and "Petition Signer Statement" sections <b>must</b> be completed prior to obtaining signatures.
	• You <b>must</b> complete the Circulator Affidavit. The Circulator Affidavit must be completed and signed <b>in front of</b> the Notary.
Submitting	• When you submit this form to the appropriate entity, all signatures must be <b>originals</b> . Copies of signatures will not be accepted.
	• Review the appropriate Candidate Bulletin ( <u>https://www.elections.virginia.gov/candidatepac-info/candidate-bulletins/</u> ) to determine where and when to submit this form.
	<ul> <li>The SBE-505/520 Declaration of Candidacy (<u>https://www.elections.virginia.gov/candidatepac-info/candidate-forms/</u>) must be submitted before or with the first petition page submitted.</li> </ul>

Do Not Submit This Instruction Page With Completed Petition Pages.