

Independent Candidate Petition Affidavit

Ark. Code Ann. § 7-7-103(b)

Name of Candidate: _____

Position: _____

District/ Division/ Ward/ Zone (if applicable): _____

Position Number or other description (if applicable): _____

Candidate hereby swears (or affirms) to the following regarding Candidate's petitions:

The signatures were not collected for a period over ninety (90) days prior to the date of this submission; and

The signatures were collected and the petition was executed and submitted in compliance with the law, on the form prescribed by the Secretary of State; and

The beginning and ending dates for collection of the signatures on my petitions are those indicated below on this Affidavit:

Petition signatures were collected between _____ and _____.
(mm/dd/yyyy) (mm/dd/yyyy)

Independent Candidate Signature

VERIFICATION

State of Arkansas)
County of _____)

On this _____ day of _____, 20____, before me, a Notary Public, duly authorized and acting, **personally appeared** _____ (name of Candidate),

known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand and official seal on the date set forth above.

Notary Public (or other authorized officer)

My commission expires: _____