Sample Cover Sheet

Designating and Independent Petitions

[Place Name of Party or Independent Body Here]

Name of Candidate	Residence Address (Also mailing address if different)	Public Office or Party Position* (Include district number where appropriate)
		*Include Term of Office when required per Election Low Sec. 6.12

*Include Term of Office when required per Election Law Sec. 6-134

Volume Number	
Total Number of Volumes in Petition	

This petition contains the number, or in excess of the number, of valid signatures, required by Election Law.

Contact Person to Correct Deficiencies:

Name				
	(Please Print)			
Residence Address				
	(Also mailing address if different)			
Phone		Fax		
			(Include if notice by fax desired)	
Email				
	(Include if notice by email desired)			

I hereby authorize that notice of any determination made by the Board of Elections be transmitted to the person listed above. If an email address is provided, all notices or determinations shall be sent by email only. I understand that by not providing an email notice, notifications will be sent by mail which will delay notification.

Signature of Candidate or Agent _____