



SIGNATURES-IN-LIEU PETITION APPLICATION / AUTHORIZATION

Note: This is a public document which can be made available upon receipt of the appropriate request from an individual or organization.

Candidate Information		
Name as it is to appear on In Lieu Petition Form		
Office (include district number if applicable)		
Party Preference (For Voter-Nominated Offices)		
Residence Address <small>Optional for Judicial Candidates [EC 8023(c)]. However, must be provided to the Elections Official for verification.</small>		
Residence Address:	City, State ZIP	
Mailing Address		
Mailing Address:	City, State ZIP	
Business Address		
Business Address:	City, State ZIP	
Phone / Email		
Day: ()	Evening: ()	Email:
Candidate Signature:		
X _____	Date: _____	
Your Authorized Representative (Optional)		
Name		
Address		
Address:	City, State ZIP	
Telephone		
Day: ()	Evening: ()	
Nomination Signatures		
Pursuant to EC 8106, valid In-Lieu signatures will be credited toward In-Lieu AND Nomination Signature requirement		

Office Use Only		
Voter Registration Number		
Confidential Voter?		
Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Registered Residential Address within District		
Yes	<input type="checkbox"/>	No <input type="checkbox"/>