

# Independent Nominating Petition Sec 6-140, ELECTION LAW

I, the undersigned, do hereby state that I am registered voter of the political unit for which a nomination for public office is hereby being made, that my present place of residence is truly stated opposite my signature hereto, and that I do hereby nominate the following named person (or persons) as a candidate (or candidates) for election to public office (or public offices) to be voted for at the election to be held on the 7th day of November, 2023, and that I select the name Libertarian Party as the name of the independent body making the nomination (or nominations) and the image to the right as the emblem of such body.



Name(s) of Candidate(s)	Public Office or Party Position <small>(include district number, if applicable)</small>	Residence Address <small>(Also post office address if not identical)</small>
Thomas Daniel Quiter	Town of Guilford Supervisor	1789 State Highway 8 Mount Upton, NY 13809 (Town of Guilford)

In witness whereof, I have hereunto set my hand, the day and year placed opposite my signature.

#	Date	Signature of signer <small>Printed name of signer</small>	Residence	Town or City <small>(NYC enter county)</small>
1	/ /2023			
	Printed Name:			
2	/ /2023			
	Printed Name:			
3	/ /2023			
	Printed Name:			
4	/ /2023			
	Printed Name:			
5	/ /2023			
	Printed Name:			

### STATEMENT OF WITNESS

I, \_\_\_\_\_ state: I am a duly qualified voter of the State of New York.

I now reside at \_\_\_\_\_

Each of the individuals whose names are subscribed to this petition sheet containing \_\_\_\_\_ signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet.

I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Witness

**WITNESS IDENTIFICATION INFORMATION:** The following information for the witness named above must be completed prior to filing with the Board of Elections in order for this petition to be valid.

\_\_\_\_\_ Town or City Where Witness Resides

\_\_\_\_\_ County Where Witness Resides