

PETITION FOR OFFICE OF THE PRESIDENT OF THE UNITED STATES

For Secretary of State Use Only

Name of Candidate: _____
Residence Address: _____
City, State, Zip Code: _____
Party Affiliation: _____

To the Honorable Robert Evnen, Secretary of State for the State of Nebraska:

We, the undersigned registered voters of the State of Nebraska and the county of _____, being severally qualified to sign this petition, respectfully request that the above-named candidate be placed on the ballot at the Primary Election to be held the 14th day of May 2024, and each for himself or herself says: I have personally signed this petition on the date opposite my name; I am a registered voter of the State of Nebraska and county of _____ and am qualified to sign this petition; and my date of birth and city, village, or post office address and my street and number or voting precinct are correctly written after my name.

WARNING TO PETITION SIGNERS—VIOLATION OF ANY OF THE FOLLOWING PROVISIONS OF LAW MAY RESULT IN THE FILING OF CRIMINAL CHARGES: Any person who signs any name other than his or her own to any petition or who is not qualified to sign the petition shall be guilty of a Class I misdemeanor. Any person who falsely swears to a circulator’s affidavit on a petition, who accepts money or other things of value for signing a petition, or who offers money or other things of value in exchange for a signature upon any petition shall be guilty of a Class IV felony.

THIS PETITION IS CIRCULATED BY A PAID CIRCULATOR.

	DATE (mm/dd/yy)	SIGNATURE	PRINTED NAME	DATE OF BIRTH	ADDRESS (Street Number & Name, City or Village, Zip Code)
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Not more than twenty signatures on one sheet shall be counted. Nebraska Revised Statute §32-1409

STATE OF NEBRASKA)
) ss.
COUNTY OF _____)

_____, (name of circulator) being first duly sworn, deposes and says that he or she is the circulator of this petition containing _____ signatures, that he or she is at least eighteen years of age, that each person whose name appears on the petition personally signed the petition in the presence of the affiant, that the date to the left of each signature is the correct date on which the signature was affixed to the petition and that the date was personally affixed by the person signing such petition, that the affiant believes that each signer has written his or her

name, street and number or voting precinct, and city, village, or post office address correctly, that the affiant believes that each signer was qualified to sign the petition, and that the affiant stated to each signer the object of the petition as printed on the petition before he or she affixed his or her signature to the petition.

_____ Circulator's Signature
_____ Address
_____ City, State, Zip

Subscribed and sworn to before me, a notary public, this _____ day of _____, 20__ at _____, Nebraska.
(City or village of notarial act.)

(Seal)

_____ Notary Public