CANDIDATE PETITION

Notes: - *All information on this form becomes a public record upon receipt by the Supervisor of Elections.*
- *It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, Florida Statutes]*
- *If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.*

I, _____ the undersigned, a registered voter
(print name as it appears on your voter information card)

in said state and county, petition to have the name of   **Tom Vail**
_____

placed on the Primary/General Election Ballot as a: [*check/complete box, as applicable*]

☐ Nonpartisan ☐ No party affiliation ☒ **REPUBLICAN** _____ Party   candidate for the office of

_____ **SUPERVISOR OF ELECTIONS FOR LAKE COUNTY** _____
(insert title of office and include district, circuit, group, seat number, if applicable)

Date of Birth or Voter Registration Number (MM/DD/YY)		Address

City	County LAKE	State FL	Zip Code

Signature of Voter	Date Signed (MM/DD/YY) [*to be completed by Voter*]

Rule 1S-2.045, F.A.C.   DS-DE 104 (Eff. 09/11)

email address: _____   phone number: _____

CANDIDATE PETITION INSTRUCTIONS

Candidates for elected offices must submit petitions signed by registered voters in the district in order to be placed on the ballot

Please sign and return this petition to help Tom Vail qualify

1. The Signer must be a Voter registered in Lake County, FL - any Party
2. Handwriting must be easy to read
3. Anyone can fill the Voter's name and other information
4. Signature and Date MUST be filled by Voter personally
5. Make sure form is filled out completely
6. Contact Vara at 352-255-7080 to pick up signed petitions
7. Signed petitions may be mailed to:

Tom Vail Campaign
13900 CR 455, Unit 107-334
Clermont, FL 34711