St. Joseph City Candidate for City Commission Filing Packet

The following information should be included in this packet:

- · Filing Instructions and Information Sheet
- Statement of Candidacy
- · Affidavit of Identity and Receipt of Filing
- Statement of Organization Form for Candidate Committees
- Nominating Petitions 3 Sheets
- Circulating City Petition Forms

Additional Digital Information:

- Information Manuals –
 https://www.michigan.gov/sos/elections/Disclosure/cfr/filing-dates/candidate-gub-committees
- Candidate Manual https://mertsplus.com/mertsuserguide/index.php?n=MANUALS.
 CandidateManual#trailstart

Additional copies of the Nominating Petition may be obtained from the St. Joseph City Clerk

THE CITY OF ST. JOSEPH CANDIDATES FOR CITY COMMISSION

Instructions and Information

- 1. The deadline for filing nominating petitions is **4:00 p.m. on Tuesday, April 25, 2023**
- 2. A minimum of **twenty-five (25) signatures** are required but not more than 50 per petition
 - a. Complete the top portion of the petition prior to circulating the petition
 - b. Read "Preparing, Circulating and Filing Petitions" brochure provided
 - c. A fee of \$100 may be paid in lieu of filing a nominating petition
- 3. Primary Election, if necessary, will be held **August 8, 2023**
 - a. A Primary Election will be held if more than six (6) persons file for the three (3) open City Commission seats.
- 4. General Election will be held **November 7, 2023**
- 5. Forms which **MUST** accompany nominating petitions when submitted to the **City Clerk**
 - a. Statement of Candidacy One (1) NOTARIZED copy to the City Clerk
 - b. Affidavit of Identity One (1) NOTARIZED copy to the City Clerk
 - i. Office sought = City Commissioner
 - ii. Office = Non-partisan
 - iii. Term = Regular
 - iv. There is no filing fee
 - c. Statement of Organization Form for Candidate Committees MUST be filed by all candidates or subject to fine
- 6. A candidate must form a Candidate Committee within ten (10) days of becoming a candidate and then has an additional ten (10) days to register the committee to the County Clerk's Office.
 - a. Must be filed for all new and/or re-formed committees
 - b. Committee Identification Number is assigned by the County Clerk
 - c. Full name of committee can be the candidate's name
 - d. Treasurer of the committee can be the candidate
 - e. If the committee DOES NOT expect to receive or expend more than \$1,000 for the election, the reporting waiver section should be marked
 - f. If the committee, in fact, DOES NOT expend more than \$1,000, no reports are required
 - g. If after filing a waiver, the committee DOES receive or expend more than \$1,000, a report MUST be filed
 - h. If the committee fails to file for a waiver, the necessary reports MUST be filed REGARDLESS of how little is received or expended
 - i. A depository must be listed but an account does not have to be opened
 - j. Questions regarding the "Statement of Organization Form for Candidate
 - k. Committees" should be referred to the County Clerk's Office at 983-7111 ext. 8332

STATEMENT OF CANDIDACY To Become a Candidate for City Office in the City of St. Joseph, Michigan At a Primary Election

REQUIRED BY SECTION 5, OF ARTICLE IV, OF THE CITY CHARTER, ADOPTED JULY 31, 1928

State of Michigan, County of Berrien ss. I, ______, being first duly sworn, say that I reside at ______, within the City of St. Joseph, County of Berrien, State of Michigan; that I am a qualified voter therein; that I am a candidate for nomination to the office of ______ to be voted upon at the Primary Election to be held on the 8th day of August, 2023, and that I possess the legal qualifications therefore, and I hereby request that my name be printed upon the official Primary ballot for nomination at such Primary election for such office. Signed: Subscribed and sworn to before me, a Notary Public, on this _____ day of _____, 2023 Notary Public, Berrien County, Michigan

My Commission expires:

Affidavit of Identity and Receipt of Filing

All information must be completed unless otherwise noted. Missing or incorrect information may result in disqualification. Judicial candidates should use combined judicial affidavit of identity/qualification form rather than this form.

TOTAL SERVICE STREET	LIAN SOLD TO								
SECTION 1	.	First name	Middle name	Middle name		Last name	Last name		
	rmati	Year of birth My name has formally changed in the last 10 years for a reason other than marriage or divorce. My former name is:							
	Candidate information	Residential address			-/	City	ZIP		
		Mailing address, if different than above				City	ZIP		
		Phone number	Email	Email		Campaign w	Campaign website, if applicable		
SECTION 2 Office and ballot information		Office name	Jurisdiction		District/	'Circuit/Ward			
	I am running for a partisan office, and my political party is: I am running for a nonpartisan office without party affiliation (judicial office: see note above) I am running for a partisan office without party affiliation. General election DATE (MONTH/DAY/YEAR) DATE (MONTH/DAY/YEAR) Term of office (select one): Regular term Partial term expiring: DATE (MONTH/DAY/YEAR) Recall Indicate exactly how you want your name to be printed on the ballot (use upper and lowercase letters):								
	Offic	Filing method (Select one):	+ \Bar{100} filing fee	(if app	licable)	January Destroy			
	ij	I previously ran in Michigan for office that required filing reports under the Michigan Campaign Finance Act. I ran in the following counties:							
	edgment	I certify that at this date, all statements, reports, late filing fees, and fines due from me or any candidate committee organized to support my election under the Michigan Campaign Finance Act have been filed or paid.							
8 N	nowle	I certify that I am a United States citizen and I meet the statutory and constitutional requirements for the office sought.							
SECTION	Certification & acknowledg	By signing, I acknowledge that making a false statement in this affidavit is perjury – a felony punishable by a fine up to \$1,000 or imprisonment for up to five years and may result in disqualification from the ballot. Candidate signature Date							
	ificat	Notary signature	Notary signature			Notary			
	Cert	County of commission:				Acting in the County of: Date of notarization:			
		My commission expires: Date (MONTH/DAY/Year)				DATE (MONTH/DAY/YEAR)			
ice e	<u> </u>	Date of filing:	Received by: DATE (MONTH/DAY/YEAR)		Reviev	ved by:	Check number:		
Office use only		Number of petition Sheets:			Campa	ampaign Finance Number:			



ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE COMMITTEES FILED WITH A COUNTY CLERK

		information on this form	s made public.				
1. Committee ID #:	*2. Type of Filing: Orig	inal: endment to items:	Eff. Date:				
*3. Full Name of Committee (must include	Candidate's first and last na	ame):					
*4a. Candidate Full Name: Last Name	1	First Name	M.I.				
*4b. Political Party (if applicable):		*4c. County of Reside	nce:				
*4d. Office Sought:		*4e. District or Jurisdi	ction:				
*5. Date Committee was Formed:	1 2						
*6a. Committee Phone:		6b. Committee Fax #:					
*6c. Committee Email Address:		6d. Committee Websi	te Address:				
*7a. Complete Committee Mailing Addres	s (May be PO Box):		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
*7b. Complete Committee Street Address	(May not be PO Box):	*	The second second				
*8. Treasurer Name and Complete Residen	itial Address:						
Phone #:	Email Add	lress:					
9. Designated Record Keeper Name and Co	omplete Address:	35					
Phone #:	Email Add	Iress:					
*10. REPORTING WAIVER REQUEST: YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of \$1,000.00 in an election. I/We understand that if the committee does not spend or received in excess of \$1,000.00 in an election, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the \$1,000.00 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports. NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of \$1,000.00 in an election. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.							
*11. Name and Address of Depositories or this item must be completed, an account do *Official Depository (name and address): Secondary Depository (name and address)	pes not have to be opened un		Bank, Credit Union or Savings & Loan Association) While received.				
12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)							
*Candidate:	Date:	*Current Treasurer	Date:				
*Designated Record Keeper (If Applicable)			Date:				

INSTRUCTIONS FOR COMPLETING THE STATEMENT OF ORGANIZATION FOR LOCAL CANDIDATE COMMITTEES

STATE LEVEL COMMITTEES FILE THIS FORM ELECTRONICALLY

As soon as an individual becomes a "candidate" under Michigan's Campaign Finance Act, P.A. 388 of 1976, as amended, he or she has 10 calendar days to form a Candidate Committee. After the committee's formation date, the candidate has an additional 10 calendar days to register the committee. A candidate registers a Candidate Committee by filing a Statement of Organization form with his or her filing official. A person becomes a candidate under the Campaign Finance Act on the date he or she:

- · files a nominating petition, a filing fee or an affidavit of candidacy; or
- receives a contribution or makes an expenditure, or gives consent to someone else to receive a contribution or make an expenditure with a view to bringing about the individual's nomination or election to an elective office; or
- is nominated for an elective office by a political party caucus or convention.

Candidates exempted from Statement of Organization Filing Requirements:

- A candidate who seeks a precinct delegate position is not required to file a Statement of Organization.
- A candidate who seeks a school board position in a school district with a pupil membership count of 2,400 or less AND receives or spends \$1,000.00 or less for the election is not required to file a Statement of Organization.

NOTE: The information contained on the Statement of Organization must be kept up-to-date. If a change in the information takes place, an amendment to the form must be filed no later than the due date of the first campaign statement required of the committee after the change. The treasurer serving at the time of the change must sign the amendment.

WHERE TO FILE THIS FORM

Offices that file with the County Clerk's Office:

A candidate for a county, city, township, village, public school board, community college board or other local elective
office is required to file two copies of this form with the clerk for the county in which the candidate resides.
 EXCEPTION: A local candidate whose district crosses county boundaries is required to file this form with the clerk of the
county where the greatest number of voters eligible to vote on the office resides.

Offices that file with the Michigan Department of State Bureau of Elections must file this form electronically using the assigned Internet application:

 A candidate for Governor, Lt. Governor, Secretary of State, Attorney General, State Senate, State Representative, State Board of Education, University of Michigan Regent, Michigan State University Trustee, Wayne State University Governor, Michigan Supreme Court, Court of Appeal, Circuit Court, District Court, Probate Court and Municipal Court.

INSTRUCTIONS

Type or clearly print in ink all information requested on the Statement of Organization form. Each entry on the form is discussed below.

Note: If filing an Original Statement of Organization, all fields preceded with an * are required fields.

- On the original Statement of Organization, leave Item 1 blank. An identification number will be assigned to the committee by the filing official. For an amendment enter the assigned identification in Item 1.
- *ITEM 2: Indicate whether the Statement of Organization is an original or amendment. If this is an amendment, list all item number(s) and effective date of the change.
- *ITEM 3: Enter the committee's official name. The committee name must include the candidate's first and last name.
- *ITEM 4a: Enter the candidate's full name.
- *ITEM 4b: If the office sought by the candidate is a partisan office, enter the candidate's party affiliation.
- *ITEM 4c: Enter the candidate's county of residence.
- *ITEM 4d: Enter name of the office sought by the candidate.
- *ITEM 4e: Enter the district number or jurisdiction (county, city, township, village, school district) served by the office.
- *ITEM 5: Enter the date the committee was formed. This form must be received by your filing official within 10 calendar days after the committee's formation date. A late filing fee of \$10.00 per business day is assessed if this form is filed late.
- *ITEM 6a: Enter the committee's phone number including the area code.
- ITEM 6b: Enter the committee's fax number.
- *ITEM 6c: Enter the committee's e-mail address.
- *ITEM 7a: Enter the committee's mailing address. A post office box is acceptable. All mail from the filing official will be directed to the committee's mailing address.
- *ITEM 7b: Enter the committee's street address. A post office box is not acceptable. (List the candidate's or treasurer's home address if no other address is available.)
- *ITEM 8: Enter the full name (last name, first name, middle initial), complete residential address, telephone number and and e-mail address of the committee's treasurer. The candidate may serve as the committee's treasurer. A committee treasurer must be listed in this item.

- If the committee has a designated recordkeeper enter his or her name, (last name, first name, middle initial) residential complete address. This is the person, other than the treasurer, who will be responsible for the committee's records and campaign statement filings. If the committee's treasurer will personally handle these responsibilities, leave this item blank. An individual designated in this item may sign campaign statements in place of the treasurer, but does not have the authority to sign a Statement of Organization form in place of the treasurer.
- *ITEM 10: Reporting Waiver Request.
 - •Select "YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER" if the committee does not expect to receive or spend more than \$1,000.00 in an election. The committee does not owe detailed campaign statements as long as the committee does not receive or spend more than \$1000.00. This option must be selected to obtain the Reporting Waiver.
 - •Select "NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER" if the committee expects to receive or expend in excess of \$1,000.00 in an election. This means that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of \$1,000.00 in an election. Election means primary, general, special or millage election, or a convention or caucus of a political party held in this state to nominate a candidate. Election also includes a recall vote.
- *ITEM 11: Enter the name and address of the Michigan bank, savings and loan association or credit union that the committee now uses, intends to use or would use as its "official depository". While this item must be completed, an account does not have to be opened until the first contribution is received. Enter the name and addresses of any "secondary depositories" the committee uses or intends to use. A secondary depository may be used only for the deposit of contributions; it may not be used for committee expenditures.
- *ITEM 12: This form **must** be signed and dated by the candidate, the committee's treasurer and designated recordkeeper. If the candidate is serving as the committee's treasurer, the candidate signs once on the line for the candidate's signature.

INSTRUCTIONS ON REVERSE SIDE

NOMINATING PETITION (CITY/TOWNSHIP NONPARTISAN)

City We, the undersigned, registered and qualified voters of the Township STRIKE ON		, in the Coun	ty of		, and Sta	te of Mic	chigan		
nominate(Name of Candidate)		(Street Address or Rural Route	,	(City or Township)					
as a candidate for the office of(Title of Office/Term Exp	iration Date)	(District, if any)	for at the Primary Election to be held on the	day of		, 20			
WARNING - A PERSON WHO KNOWINGLY S A PETITION MORE THAN ONCE	SIGNS MORE PETITIONS FOR THE, OR SIGNS A NAME OTHER THA	IE SAME OFFICE THANN HIS OR HER OWN	AN THERE ARE PERSONS TO B I IS VIOLATING THE PROVISIONS	E ELECTED TO THE S OF THE MICHIGAN	OFFICE ELECTI	, SIG ON L	NS .AW.		
Signature	Printed Name		Street Address or Rural Route	al Route Zip Code			DATE OF SIGNING Month Day Year		
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11.	·								
12.			·						
	TE OF CIRCULATOR	citizen: that each signature on	CIRCULATOR — CERTIFICATE UNTIL AF	DO NOT SIGN OR DA		N			
the petition was signed in his or her presence; that he or she has nei knowledge of a person signing the petition more than once; and that the person purporting to sign the petition, the person signing the pethe he heading of the petition, and the elector was qualified to sign the pethe he heading of the petition, and the elector was qualified to sign the pether has been described by the petition.	(Signature of Circulator)			/ Date)					
If the circulator is not a resident of Michigan, the circulator shall n his petition sheet is invalid and the signatures will not be counted by a	(Printed Name of Circulator)				***************************************				
circulator asserts that he or she is not a resident of Michigan and agrinearing that concerns a petition sheet executed by the circulator and he Secretary of State has the same effect as if personally served on	(Complete Residence Address [Street and Number or Rural Route]) - [Do not enter a post office box] (City or Township, State, Zin Code)								
			n.uv of Inwasana State /In Cone)						

WARNING-A CIRCULATOR KNOWINGLY MAKING A FALSE STATEMENT IN THE ABOVE CERTIFICATE, A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

REORDER NO. 405 (50 TO A PAD) REV. 02/15
PRINTING SYSTEMS • TAYLOR, MI • 1-800-95-12345 • FORM APPROVED BY DIRECTOR OF ELECTIONS, STATE OF MICHIGAN

(County of Registration, if Registered to Vote, of a Circulator who is not a Resident of Michigan)

READ BEFORE CIRCULATING PETITION -

The validity of signatures placed on this petition may be affected if the following is not observed.

Complete the heading of the petition before circulating it.

- Enter the city or township and county where the petition will be circulated. Indicate whether the jurisdiction listed is a "city" or a "township." Do not list more than one city or township.
- Enter the candidate's complete name and address and the office the candidate seeks and the term expiration date. Include the district number of the office if there is one. (Additional office information is needed if the candidate seeks a judicial position. See "Important Information for Judicial Candidates" below.)
- · Enter the date of the primary election.

Make sure that all signers properly complete the petition.

- · Each signer must be registered to vote in the city or township listed in the heading.
- · Each signer must sign and print his or her first and last name.1
- · Each signer must enter his or her full address. A rural route number is acceptable. A post office box is not acceptable.
- Each signer must enter his or her Zip Code.2
- Each signer must date his or her signature with the month, day and year.

Complete the circulator's certificate after circulating the petition.

- Sign and print your full name and enter the month, day and year. Signatures on the petition which are dated after the date on the circulator's certificate are invalid.
- Enter your complete residence address (street and number or rural route do not enter a P.O. Box), city or township, state, and zip code 2.
- If you do not reside in Michigan, enter your county of registration if you are registered to vote in your home state, and make a cross or a check mark in the box that precedes the final paragraph of the circulator certificate statement on the left side of the form.

Circulate the petition properly.

- · Do not fail to question signers on their city or township of registration.
- · Do not complete the heading of the petition after signatures have been affixed on the petition.
- · Do not leave the petition unattended.

¹The failure of the circulator or an elector who signs the petition to print his or her name or to print his or her name in the proper location does <u>not</u> affect the validity of the circulator's or signer's signature. However, a printed name located in the space designated for printed names does <u>not</u> constitute the signature of the circulator or elector.

²The failure of the circulator or an elector who signs the petition to enter a Zip Code or to enter his or her correct Zip Code does <u>not</u> affect the validity of the circulator's or signer's signature.

IMPORTANT INFORMATION FOR JUDICIAL CANDIDATES

Petitions circulated for a judicial office must bear the appropriate designation listed below to indicate the office sought by the candidate.

- Regular Term Incumbent Position
- Regular Term Non-Incumbent Position
- Partial Term Incumbent Position*
- Partial Term Non-Incumbent Position*
- New Judgeship

*Add expiration date of term if more than one partial term will be filled in judicial district. The terms "vacancy," "partial term" and "unexpired term" are interchangeably used to reference a judicial position which will be filled at an election for less than the full term.

OBTAINING INFORMATION ON APPROPRIATE OFFICE DESIGNATIONS:

Michigan election law stipulates that in instances where a candidate for Court of Appeals Judge, Circuit Court Judge, District Court Judge, Probate Court Judge or Probate District Court Judge seeks election in a district where there is a combination of "new" positions, "incumbent" positions and/or "nonincumbent" positions to fill, the candidate must apply to the Department of State's Bureau of Elections for a "written statement of office designation to correspond to the judgeship sought by the candidate."

Michigan election law further directs the Bureau of Elections to designate a judicial position as an "incumbent" position in any instance where 1.) there is an incumbent judge eligible to seek reelection to the position and 2.) the deadline for filing the Affidavit of Candidacy has not yet elapsed. If the incumbent judge does not file for reelection by the deadline for submitting an Affidavit of Candidacy, Michigan election law directs the Bureau of Elections to 1.) redesignate the position as a "nonincumbent" position and 2.) notify all candidates seeking election in the judicial district that a "nonincumbent" position exists. Michigan election law further stipulates that in such instances, 1.) nominating petition sheets circulated for the "nonincumbent" position subsequent to the Affidavit of Candidacy filing deadline "shall bear an office designation of nonincumbent position" and 2.) signatures collected prior to the Affidavit of Candidacy filing deadline "may be filed with the nonincumbent nominating petitions." The Affidavit of Candidacy filing deadline elapses 134 days prior to the date of the August primary election.

For further information, contact the Michigan Department of State, Bureau of Elections, P.O. Box 20126, Lansing, Michigan 48901-0726. Phone: (517) 373-2540 Email: elections@michigan.gov Web: www.michigan.gov/elections



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City We, the undersigned, registered and qualified voters of the Township STRIKE ON		, in the Coun	ty of		, and Sta	te of Mic	chigan		
nominate(Name of Candidate)		(Street Address or Rural Route	,	(City or Township)					
as a candidate for the office of(Title of Office/Term Exp	iration Date)	(District, if any)	for at the Primary Election to be held on the	day of		, 20			
WARNING - A PERSON WHO KNOWINGLY S A PETITION MORE THAN ONCE	SIGNS MORE PETITIONS FOR THE, OR SIGNS A NAME OTHER THA	IE SAME OFFICE THANN HIS OR HER OWN	AN THERE ARE PERSONS TO B I IS VIOLATING THE PROVISIONS	E ELECTED TO THE S OF THE MICHIGAN	OFFICE ELECTI	, SIG ON L	NS .AW.		
Signature	Printed Name		Street Address or Rural Route	al Route Zip Code			DATE OF SIGNING Month Day Year		
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	TE OF CIRCULATOR	citizen: that each signature on	CIRCULATOR — CERTIFICATE UNTIL AF	DO NOT SIGN OR DA		N			
the petition was signed in his or her presence; that he or she has nei knowledge of a person signing the petition more than once; and that the person purporting to sign the petition, the person signing the pethe he heading of the petition, and the elector was qualified to sign the pethe he heading of the petition, and the elector was qualified to sign the pether has been described by the petition.	(Signature of Circulator)			/ Date)					
If the circulator is not a resident of Michigan, the circulator shall n his petition sheet is invalid and the signatures will not be counted by a	(Printed Name of Circulator)				***************************************				
circulator asserts that he or she is not a resident of Michigan and agrinearing that concerns a petition sheet executed by the circulator and he Secretary of State has the same effect as if personally served on	(Complete Residence Address [Street and Number or Rural Route]) - [Do not enter a post office box] (City or Township, State, Zin Code)								
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- · Enter the date of the primary election.

Make sure that all signers properly complete the petition.

- · Each signer must be registered to vote in the city or township listed in the heading.
- · Each signer must sign and print his or her first and last name.1
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Complete the circulator's certificate after circulating the petition.

- Sign and print your full name and enter the month, day and year. Signatures on the petition which are dated after the date on the circulator's certificate are invalid.
- Enter your complete residence address (street and number or rural route do not enter a P.O. Box), city or township, state, and zip code 2.
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For further information, contact the Michigan Department of State, Bureau of Elections, P.O. Box 20126, Lansing, Michigan 48901-0726. Phone: (517) 373-2540 Email: elections@michigan.gov Web: www.michigan.gov/elections



INSTRUCTIONS ON REVERSE SIDE

NOMINATING PETITION (CITY/TOWNSHIP NONPARTISAN)

City We, the undersigned, registered and qualified voters of the Township STRIKE ON		, in the Coun	ty of		, and Sta	te of Mic	chigan		
nominate(Name of Candidate)		(Street Address or Rural Route	,	(City or Township)					
as a candidate for the office of(Title of Office/Term Exp	iration Date)	(District, if any)	for at the Primary Election to be held on the	day of		, 20			
WARNING - A PERSON WHO KNOWINGLY S A PETITION MORE THAN ONCE	SIGNS MORE PETITIONS FOR THE, OR SIGNS A NAME OTHER THA	IE SAME OFFICE THANN HIS OR HER OWN	AN THERE ARE PERSONS TO B I IS VIOLATING THE PROVISIONS	E ELECTED TO THE S OF THE MICHIGAN	OFFICE ELECTI	, SIG ON L	NS .AW.		
Signature	Printed Name		Street Address or Rural Route	al Route Zip Code			DATE OF SIGNING Month Day Year		
1.					WOIRI	Day	_ rear		
2.									
3.									
4.									
5.							-		
6.	·								
7.									
8.									
9.									
10.			· .						
11.	·								
12.			·						
	TE OF CIRCULATOR	citizen: that each signature on	CIRCULATOR — CERTIFICATE UNTIL AF	DO NOT SIGN OR DA		N			
the petition was signed in his or her presence; that he or she has nei knowledge of a person signing the petition more than once; and that the person purporting to sign the petition, the person signing the pethe he heading of the petition, and the elector was qualified to sign the pethe he heading of the petition, and the elector was qualified to sign the pether has been described by the petition.	(Signature of Circulator)			/ Date)					
If the circulator is not a resident of Michigan, the circulator shall n his petition sheet is invalid and the signatures will not be counted by a	(Printed Name of Circulator)				***************************************				
circulator asserts that he or she is not a resident of Michigan and agrinearing that concerns a petition sheet executed by the circulator and he Secretary of State has the same effect as if personally served on	(Complete Residence Address [Street and Number of	or Rural Route]) - [Do not enter a po	st office box]					
			n.uv of Inwasana State /In Cone)						

WARNING-A CIRCULATOR KNOWINGLY MAKING A FALSE STATEMENT IN THE ABOVE CERTIFICATE, A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

REORDER NO. 405 (50 TO A PAD) REV. 02/15
PRINTING SYSTEMS • TAYLOR, MI • 1-800-95-12345 • FORM APPROVED BY DIRECTOR OF ELECTIONS, STATE OF MICHIGAN

(County of Registration, if Registered to Vote, of a Circulator who is not a Resident of Michigan)

READ BEFORE CIRCULATING PETITION -

The validity of signatures placed on this petition may be affected if the following is not observed.

Complete the heading of the petition before circulating it.

- Enter the city or township and county where the petition will be circulated. Indicate whether the jurisdiction listed is a "city" or a "township." Do not list more than one city or township.
- Enter the candidate's complete name and address and the office the candidate seeks and the term expiration date. Include the district number of the office if there is one. (Additional office information is needed if the candidate seeks a judicial position. See "Important Information for Judicial Candidates" below.)
- · Enter the date of the primary election.

Make sure that all signers properly complete the petition.

- · Each signer must be registered to vote in the city or township listed in the heading.
- · Each signer must sign and print his or her first and last name.1
- · Each signer must enter his or her full address. A rural route number is acceptable. A post office box is not acceptable.
- · Each signer must enter his or her Zip Code.2
- · Each signer must date his or her signature with the month, day and year.

Complete the circulator's certificate after circulating the petition.

- Sign and print your full name and enter the month, day and year. Signatures on the petition which are dated after the date on the circulator's certificate are invalid.
- Enter your complete residence address (street and number or rural route do not enter a P.O. Box), city or township, state, and zip code 2.
- If you do not reside in Michigan, enter your county of registration if you are registered to vote in your home state, and make a cross or a check mark in the box that precedes the final paragraph of the circulator certificate statement on the left side of the form.

Circulate the petition properly.

- · Do not fail to question signers on their city or township of registration.
- · Do not complete the heading of the petition after signatures have been affixed on the petition.
- · Do not leave the petition unattended.

¹The failure of the circulator or an elector who signs the petition to print his or her name or to print his or her name in the proper location does <u>not</u> affect the validity of the circulator's or signer's signature. However, a printed name located in the space designated for printed names does <u>not</u> constitute the signature of the circulator or elector.

²The failure of the circulator or an elector who signs the petition to enter a Zip Code or to enter his or her correct Zip Code does <u>not</u> affect the validity of the circulator's or signer's signature.

IMPORTANT INFORMATION FOR JUDICIAL CANDIDATES

Petitions circulated for a judicial office must bear the appropriate designation listed below to indicate the office sought by the candidate.

- Regular Term Incumbent Position
- Regular Term Non-Incumbent Position
- Partial Term Incumbent Position*
- Partial Term Non-Incumbent Position*
- New Judgeship

*Add expiration date of term if more than one partial term will be filled in judicial district. The terms "vacancy," "partial term" and "unexpired term" are interchangeably used to reference a judicial position which will be filled at an election for less than the full term.

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