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W	e, the undersigned petitioners	s, being voters of the same	district or jurisdiction	from which the candidates
seek nom	nination, and being at least 50	00 in number, hereby petit	ion you, as Secretary	of State, to cause to be
printed or	n the official ballot of the Com	monwealth of Kentucky, to	be used at the genera	al election to be held on
Novembe	er, 20, the	names of the following car	didates of the political	group/organization known
as			or as an ind	ependent candidate for
the offices	s hereinafter designated, the	names of said persons and	I their respective resid	ences being as follows:
(Name of C	andidate for President – Please Typ	e or Print) (Residentia	I Address) (0	City, State, Zip)
(Name of C	andidate for Vice President– Please	Type or Print) (Residential	Address) (	City, State, Zip)
W	e,(Name of Can			and
	(Name of Can	didate in full as desired on ballot	- Please Type or Print)	
	(1)	desired on ballot – Please Type	D: ()	hereby declare that we
	•		,	CI I
possess a	all the constitutional and statu	tory requirements of the of	tices for which we hav	е пеа.
(Si	ignature of Candidate for President)		(Signature of Candidate f	or Vice President)
	s further place in nomination th ndidates for President and Vice			
DATE	PRINTED NAME OF ELECTOR	SIGNATURE OF ELECTOR	RESIDENTIAL ADDRE	SS CITY & ZIP

**SBE 64 (04/21)** (Page 1 of 2)

Petitioners shall	Candidate include residential add ential address shall resu	Office  Iress, signature affixation date, and date of birth.  It in the signature not being counted.		t if applicable) ure affixation date, date of
DATE	BIRTH DATE	SIGNATURE OF PETITIONER	RESIDENTIAL ADDRESS	CITY & ZIP

(Additional pages may be used.)

**SBE 64-2 (04/21)** (Page 2 of 2)