

Independent Nominating Petition



I, the undersigned, do hereby state that I am a 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 persons as candidates for election to public offices to be voted for at the election to be held on the 6th day of November, 2018, and that I select the name Libertarian Party as the name of the independent body making the nominations and the image to the right as the emblem of such body.

<u>Name of Candidate</u>	<u>Public Office</u>	<u>Place of Residence</u> (also Post Office address if not identical)
Larry Sharpe	Governor of New York	23-14 24 th Ave., Astoria, NY 11102
Andrew C. Hollister	Lieutenant Governor of New York	420 North Lemoyne Ave., Rochester, NY 14612
Christopher B. Garvey	New York State Attorney General	16 Nicoll Ave., Amityville, NY 11701
Cruger E. Gallaudet	New York State Comptroller	11 Foothill Rd., Bronxville, NY 10708
Mark E. Glogowski	New York State Assembly, 139th District	1498 Lake Rd., Hamlin, NY 14464 (P.O. Box 98, Hamlin, NY 14464)

I do hereby appoint: Michael McDermott 7 Strathmore Way, Unit 104, Melville, NY 11747 Shawn Hannon 933 Meadowbrook Dr., Syracuse, NY 13224
 Brian Waddell 41 West 72nd St., Apt. 3D, New York, NY 10023

as a committee to fill vacancies in accordance with the provisions of the election law.

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

	Date	Name of Signer (printed name may be added)	Residence	Town or City Except in NYC, County
1	/ /18 X			
	printed name:			
2	/ /18 X			
	printed name:			
3	/ /18 X			
	printed name:			
4	/ /18 X			
	printed name:			
5	/ /18 X			
	printed name:			
6	/ /18 X			
	printed name:			
7	/ /18 X			
	printed name:			
8	/ /18 X			
	printed name:			
9	/ /18 X			
	printed name:			
10	/ /18 X			
	printed name:			

STATEMENT OF WITNESS

I, _____ (name of witness) state: I am a duly qualified voter of the State of New York and now reside at _____ (residence address).

Each of the individuals whose names are subscribed to this petition sheet containing _____ (fill in number) 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 must be completed prior to filing with the board of elections in order for this petition sheet to be valid.

Town or City: _____

County: _____