



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 person as candidate for election to public office 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.

Name of Candidate	Public Office	Place of Residence
Gary Popkin	Member, New York State Assembly, 52nd District	849 President Street, Brooklyn, NY 11215

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

	Date	Name of Signer (signature required) (printed name may be added)	Residence	Enter town or city (except in NYC enter county)
1	/ /18	X		Kings
	printed name:			
2	/ /18	X		Kings
	printed name:			
3	/ /18	X		Kings
	printed name:			
4	/ /18	X		Kings
	printed name:			
5	/ /18	X		Kings
	printed name:			
6	/ /18	X		Kings
	printed name:			
7	/ /18	X		Kings
	printed name:			
8	/ /18	X		Kings
	printed name:			
9	/ /18	X		Kings
	printed name:			
10	/ /18	X		Kings
	printed name:			

STATEMENT OF WITNESS

I, _____, state: I am a duly qualified voter of the State of New York. I now reside at .

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: _____, 2018

Signature of Witness

WITNESS IDENTIFICATION INFORMATION: The following information for the witness named above must be completed prior to filing with the board of elections in order for this petition sheet to be valid.

Town or City: _____

County: _____

Sheet No.: _____