

Petition/Caucus Copy Request Only

Name _____

Address: _____

City/Town/Zip: _____

Date ____/____/____

Office Use Only (Time Stamp Received)
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Are you a duly qualified voter of Wayne County, NY _____ YES _____ NO

I hereby request a copy of the following Petition or Caucus Nomination:

Candidate Name	Office	District/Ward
<input type="checkbox"/> DEM <input type="checkbox"/> REP <input type="checkbox"/> CON <input type="checkbox"/> WOR <input type="checkbox"/> Other _____		
For Office Use Only <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

Candidate Name	Office	District/Ward
<input type="checkbox"/> DEM <input type="checkbox"/> REP <input type="checkbox"/> CON <input type="checkbox"/> WOR <input type="checkbox"/> Other _____		
For Office Use Only <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

Please Indicate How You Wish To Receive The Documents:

E-Mail (size permitting) _____

Paper Copies (.25 a page)

Pick Up CD (for large files) (\$5.00 a CD)

For office use only	
Date:	Copy prepared by:
Fee paid: \$	Copy delivered by: Mail In Person Email