PETITION for NOMINATION For SPECIAL TOWN MEETING ELECTION OF OFFICERS AUGUST 13, 2024

STATE OF VERMONT) WINDHAM COUNTY)SS.

| WINDE | IAWI CO | UN1 1)88. | | | |
|---|---------|---|----------------|--|--|
| | | rsigned legal voters of the Town of Halifax hereby petitioers of the Town of Halifax, County of Windham and State | | | |
| | | (Name of Candidate – Nominee) | | | |
| | | Be a nominee for election to the office of | | | |
| | | SELECTBOARD Name of Office | | | |
| | 3 YEA | ARS, REMAINDER OF THIS TERM ENDS ON MAR | CH 3, 2026 | | |
| | | (Number of years of term) | | | |
| At the SPECIAL TOWN MEETING to be held in the Town of Halifax on the 13 th day of AUGUST 2024. We certify that we are presently voters of the Town of Halifax. | | | | | |
| SIGNA | TURE | PRINT NAME HERE | STREET ADDRESS | | |
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The deadline for filing this form in the Town Clerk's Office is 5:00 PM on Monday, July 8, 2024. A voter can sign only one petition for each office unless more than one nomination for that office is to be made, in which case the voter may sign as many petitions as there are nominations to be made. SIGNATURES OF SIX VOTERS ARE REQUIRED FOR NOMINATION (one percent of the legal voters of the town).

CONSENT of CANDIDATE HALIFAX SPECIAL TOWN MEETING **ELECTION of OFFICERS** 17 V.S.A. 2681(a)(2)

AUGUST 13, 2024

Deadline to file Consent of Candidate form is Monday, July 8, 2024 by 5:00 p.m.

The filing deadline for the CONSENT OF CANDIDATE form is no later than 5PM on the 6th Monday preceding the day of the election (Monday, July 8, 2024).

This consent form, used by local election officials to determine the form of a candidate's name, its spelling and the use of any initials or nicknames for the ballot. Please complete this form carefully, using the exact form of your name as you want it to appear on the ballot. You may include a nickname, but you may not include a title.

I consent to having my name printed on the ballot for the office of:

| - | <u>SELECTB</u> | <u>OARD</u> |
|----------------|-------------------------|--|
| | (Name of C | Office) |
| 3 YEARS, REMA | | ERM ENDS ON MARCH 3, 2026 |
| | | ou wish to run for. Each office has a are unsure of the number of years, contact |
| My name as I w | ish it to appear on the | ballot is as follows: (please print clearly) |
| | (Name of Car | ndidate) |
| | (Town of Res | sidence) |
| Date) | - | (Signature of Candidate |
| | | (Mailing Address) |
| | | |
| | | (Telephone Number) |
| | | |

The Town Clerks office will be open until 5:00 on Monday, July 8, 2024 for any outstanding consent forms needing to be submitted.