Unaffiliated Candida Vice President of the Un		nce of P	etition	Nomi	nation	Office Use Only:	
Complete, sign, attach to the petition or print legibly.	on, and file with the	e Colorado Seo	cretary of S	tate. Plea	se type		
Office Information							
Presidential Running Mate							
Qualifications for Office (You m	ust check each be	ox to affirm tl	hat you me	eet all qu	alifications fo	r this office)	
☐ At least 35 years old ☐	At least 35 years old Resident of the United States for at least 14 years Natural-born U.S. citizen						
Candidate Information							
Full Legal Name							
Name <u>exactly</u> as it will appear on	the official ballot						
Residence & Mailing Address Residence Street Address							
City		State		Zip Code			
Mailing Street Address							
City		State		Zip Code			
Telephone & E-mail Address							
Business Phone #		Extension	n				
Residence Phone #		E-mail Add	dress				
Campaign Website (optional)							
Website							
Signature Applicant's Affirmation							
I hereby accept the nomination and so on this form is, to the best of my know			tions for the c	office presc	ribed by law. Fu	rthermore, the information provided	
Signature of Candidate		Date of Signir	ng				
STATE OF COLORADO)					[seal]	
COUNTY OF) ss.)						
Subscribed and sworn to before me th	s day of	Month	, 20 Yea	by	Printed name of	f Candidate Above	
Signature (and Title) of Notary / Officia	l Administering Oath						
My Commission Expires:							



Colorado Secretary of State 1700 Broadway, Suite 550 Denver, Colorado 80290 Phone: (303) 894-2200 x6333

Fax: (303) 869-4861 Email: <u>ballot.access@coloradosos.gov</u>

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