

CANDIDATE PETITION

Note:

- All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.
- Under Florida law, it is a first degree misdemeanor, punishable as provided in s. 775.082 or s. 775.083, Florida Statutes, to knowingly sign more than one petition for a candidate, a minor political party, or an issue. [Section 104.185, Florida Statutes]
- If all requested information on this form is not completed, the form will not be effective as a Candidate Petition Form.

I, _____ the undersigned, a registered voter
(Please print name as it appears on voter information card)

in said state and county, petition to have the name of **C. Shannon Roberts**

placed on the Primary / General Election Ballot as a: Party **Democrat**
(Name of political party)
 Nonpartisan No Party Affiliation (formerly independent)

Candidate for the office of: **United States House of Representatives, Congressional District 15**
(Include district, circuit, group, seat number, if applicable)

| | |
|--|--------------------------|
| Date of Birth or Voter Registration Number | Residence Address |
|--|--------------------------|

| | | | |
|-------------|---------------|---------------------------|-----------------|
| City | County | State FL | Zip Code |
|-------------|---------------|---------------------------|-----------------|

| | |
|---------------------------|---|
| Signature of Voter | Date Signed (to be completed by Voter) |
|---------------------------|---|

DS-DE 104 (Eff.10/07)

Information in the form above will be turned into your county Supervisor of Elections.
Information below the line is for the Shannon Roberts for Congress campaign's use only.

For your petition to be valid, you must include your printed name, date of birth or voter registration number, residential address, city, county, state and Zip Code. You must also sign and date the form.

Completed petitions should be mailed to:

Shannon Roberts for Congress
P.O. Box 155
Cape Canaveral, FL 32920

E-mail Address _____

Phone Number _____

- I will donate to Shannon's campaign!
- I will volunteer for Shannon's campaign!

Paid for by Shannon Roberts for Congress.

