

**STATE OF ALASKA  
APPLICATION FOR LIMITED POLITICAL PARTY**

Return this application and the signature pages to:

**Division of Elections  
PO Box 110017  
Juneau, AK 99811-0017**

We, the attached named qualified voters of the State of Alaska, hereby petition to become a Limited Political Party for the purpose of selecting candidates for electors of President and Vice President of the United States at the next presidential election under AS 15.30.025. Our Limited Political Party shall be known as:

---

**NOTE: Party name or an abbreviation of the party name will appear on the ballot following the candidate's name. The group may not assume a name which is so similar to an existing political party as to confuse or mislead the voters.**

**CONTACT PERSON:**

**ALTERNATE CONTACT PERSON:**

**NAME:**

---

---

**ADDRESS:**

---

---

---

---

**PHONE #:**

---

---

---

Signature of Designated Contact Person  
Representing the Limited Political Party

---

Date