

STATE OF ALASKA SUBSCRIBERS' PAGE

PETITION FOR LIMITED POLITICAL PARTIES

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

	PRINTED NAME <i>(Print Clearly – MUST PROVIDE)</i>	ALASKA RESIDENCE ADDRESS <i>(i.e. house no. & street name, mile post & road name and AK City)</i>	IDENTIFIER: <i>(Last 4 SSN, Voter #, DOB, ADL # or AK State ID #)</i>	SIGNATURE <i>(MUST PROVIDE)</i>	DATE SIGNED
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NOTE: Please attach all signature pages to the "Application for Limited Political Party" filing form. In order for the Division to clearly identify qualified voters, the voter should complete all columns for verification purposes. Failure to do so may result in the Divisions inability to identify and process the individual's subscription to the petition.