


Independent Nominating Petition

To the Board of Elections:

I, the undersigned, do hereby state that I am a registered voter of the political unit for which a nomination for public office is hereby being made, that my present place of residence is truly stated opposite my signature hereto, and that I do hereby nominate the following named person as a candidate for election to public office to be voted for at the election to be held on the fourth day of November, 2003, and that I select the name **GREEN PARTY** as the name of the

independent body making the nomination and  as the emblem of such body.

| NAME OF CANDIDATE | PUBLIC OFFICE | PLACE OF RESIDENCE |
|-------------------|---------------|--------------------|
| | | |

I DO HEREBY APPOINT,

as a committee to fill vacancies in accordance with the provisions of the Election Law .

In witness whereof, I have hereunto set my hand, the day and year placed opposite my signature .

| Date | Name of Signer (Signature Required) | Residence | Township |
|-------------------------------|-------------------------------------|-----------|----------|
| 1) _____ 2003 Printed Name | ----- | ----- | |
| 2) _____ 2003 Printed Name | ----- | ----- | |
| 3) _____ 2003 Printed Name | ----- | ----- | |
| 4) _____ 2003 Printed Name | ----- | ----- | |
| 5) _____ 2003 Printed Name | ----- | ----- | |
| 6) _____ 2003 Printed Name | ----- | ----- | |
| 7) _____ 2003 Printed Name | ----- | ----- | |
| 8) _____ 2003 Printed Name | ----- | ----- | |
| 9) _____ 2003 Printed Name | ----- | ----- | |

STATEMENT OF WITNESS

I, (name of witness).....state: I am a duly qualified voter of the State of New York and am also duly qualified to sign the petition. I now reside at (residence address).....New York. Each of the individuals whose names are subscribed to this petition sheet containing (fill in number).....signatures, subscribed the same in my presence on the dates above indicated and identified himself to be the individual who signed this sheet. I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

Date.....,2003
Signature of Witness

WITNESS IDENTIFICATION INFORMATION

The following information for the witness named above must be completed prior to filing with the board of elections in order for this petition sheet to be valid.

Township County of Suffolk