



STATE OF UTAH

2016 PETITION PACKET SUBMISSION FORM

TO BE FILLED OUT BY THE CANDIDATE OR DESIGNATED AGENT

Candidate Name

Designated Agent Name (if a designated agent, not the candidate, is submitting petition packets)

Estimated Number of Petition Packets in Submission

Estimated Number of Petition Signatures in Submission

Number of Required Petition Signatures

Please Indicate: _____ First submission
_____ Supplemental submission

Please Initial:

_____ I understand the totals provided above are estimates, are not an official count, and may not reflect the final count of petition packets or verifiable signatures.

Signature of Candidate or Designated Agent

Date

OFFICE USE ONLY

Signature of Filing Officer

Submission Date and Time

Date

Time

AM / PM