


**OFFICIAL FILING FORM**



Registrar-Recorder/County Clerk  
Los Angeles County

By: \_\_\_\_\_  
Elections Deputy

Date Issued: 12/22/17

Filed in County of \_\_\_\_\_  
County Elections Official

By: \_\_\_\_\_  
Elections Deputy

Date Received: \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

JOB NO. \_\_\_\_\_ FILING NO. \_\_\_\_\_

**FOR OFFICE USE ONLY**

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**FOR CHECKERS**

TOTAL OK \_\_\_\_\_

TOTAL X \_\_\_\_\_

TOTAL NO. OF PAGE(S) \_\_\_\_\_

GRAND TOTAL \_\_\_\_\_

DATE \_\_\_\_\_ CHECKED BY \_\_\_\_\_

(Secretary of State Use Only)

## Petition In Lieu of Filing Fee

For Voter-Nominated Offices  
(Elections Code §§ 100, 104, 8041, 8061, 8106, 8106.5, 8140; Code of Civil Procedure § 2015.5)

I, the undersigned signer for HERBERT G. PETERS, candidate for  
Name of Candidate  
 nomination/election to the office of UNITED STATES SENATOR

\_\_\_\_\_ to be voted for at the  
 STATEWIDE DIRECT PRIMARY ELECTION to be held on June 05, 2018, hereby assert as follows:

I am a resident of \_\_\_\_\_ in \_\_\_\_\_ County and am  
 registered to vote at the address shown on this petition.

I am not at this time a signer of any other petition in lieu of filing fee of any other candidate for the above-name office.

My residence is correctly set forth after my signature hereto:

12011

PRECINCT <small>(To be entered by Elections Official)</small>	NAME (As Registered)	RESIDENCE (As Registered - No P.O. BOX) WITH CITY & ZIP	VERIFICATION <small>(To be entered by Elections Official)</small>
1	Print	Residence Address ONLY	
	Sign	City or Town	
2	Print	Residence Address ONLY	
	Sign	City or Town	
3	Print	Residence Address ONLY	
	Sign	City or Town	
4	Print	Residence Address ONLY	
	Sign	City or Town	
5	Print	Residence Address ONLY	
	Sign	City or Town	

### Please Complete Affidavit of Circulator on Reverse Side

NOTE: Signatures on this form may be applied toward nomination signature requirements pursuant to Elections Code section 8061.

PRECINCT (To be entered by Elections Official)	NAME (As Registered)	RESIDENCE (As Registered - No P.O. BOX) WITH CITY & ZIP	VERIFICATION (To be entered by Elections Official)
	Print 6 _____ Sign	Residence Address ONLY _____ City or Town _____	
	Print 7 _____ Sign	Residence Address ONLY _____ City or Town _____	
	Print 8 _____ Sign	Residence Address ONLY _____ City or Town _____	
	Print 9 _____ Sign	Residence Address ONLY _____ City or Town _____	
	Print 10 _____ Sign	Residence Address ONLY _____ City or Town _____	

### AFFIDAVIT OF CIRCULATOR

(To be completed in circulator's own handwriting)

I, \_\_\_\_\_, solemnly swear (or affirm) all of the following:  
Print Name

1. That I am 18 years of age or older.
2. That my residence address, including street and number, is \_\_\_\_\_  
 (If no street or number exists, a designation of my residence adequate to readily ascertain its location is \_\_\_\_\_.)

3. That the signatures on this section of the petition were obtained between \_\_\_\_\_, 20\_\_\_\_\_,  
Month and Day  
 and \_\_\_\_\_, 20\_\_\_\_\_; that I circulated the petition and I witnessed the signatures on this section of the  
Month and Day  
 petition being written; and that, to the best of my information and belief, each signature is the genuine signature of the person  
 whose name it purports to be.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

\_\_\_\_\_ Date \_\_\_\_\_ Circulator's Signature

Examined and certified by me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_ County Elections Official

(TO BE ENTERED BY ELECTIONS OFFICIAL AFTER VERIFICATION)

Number of Valid Signatures on this Section: \_\_\_\_\_

Date: \_\_\_\_\_

Elections Deputy: \_\_\_\_\_

Time Stamp

**WARNING:** Every person acting on behalf of a candidate is guilty of a misdemeanor who deliberately fails to file at the proper time and in the proper place any nomination paper in his or her possession that is entitled to be filed under the provisions of the Elections Code. (Elections Code § 18202)