

# New Political Party Petition

(for reference see AR Code § 7-7-205)

TO: The Honorable John Thurston, Secretary of State  
State Capitol, Room 026, Little Rock, AR 72201

**WE**, the undersigned voters, propose to organize a political party known as the **Libertarian Party of Arkansas**, and desire to nominate candidates for the next general election. Each of us for himself or herself says, *“I have personally signed this petition; I am a legal voter of the State of Arkansas, and my printed name, date of birth, residence, city or town of residence, and date of signing are correctly written after my signature.”*

|    | Signature | Printed Name<br>(Voter registration) | Date of Birth | Residence<br>(Street Address) | City or Town<br>(of residence) | Date of Signing |
|----|-----------|--------------------------------------|---------------|-------------------------------|--------------------------------|-----------------|
| 1  |           |                                      |               |                               |                                |                 |
| 2  |           |                                      |               |                               |                                |                 |
| 3  |           |                                      |               |                               |                                |                 |
| 4  |           |                                      |               |                               |                                |                 |
| 5  |           |                                      |               |                               |                                |                 |
| 6  |           |                                      |               |                               |                                |                 |
| 7  |           |                                      |               |                               |                                |                 |
| 8  |           |                                      |               |                               |                                |                 |
| 9  |           |                                      |               |                               |                                |                 |
| 10 |           |                                      |               |                               |                                |                 |

Privacy Statement: Date of Birth and Residence information are optional and shall **ONLY** be used for signature verification purposes.