## THIS FORM MUST BE PRINTED IN COLOR CIRCULATION PERIOD: DECEMBER 18, 2024 THROUGH JANUARY 06, 2025

## **NOMINATION PETITION**

Petition for (Che	ck One): Ma	ayor	
	Co	ouncil Member Ward	
I, the un	dersigned registered elector of the	City of Loveland, hereby nominate	_
		(Full Name o	of Candidate)
for the office of	(Include Ward if Council Member Position	to be voted for at the election to be held on $\mathbf{N}$	larch 04, 2025.
		NOTICE	
Sign this <sub>I</sub>	petition only if:		
` '	•	nd municipal elections and are qualified to vote for t d if signing for a Council Member); and	his

## **SIGNATURE OF PETITIONERS**

(2) You have <u>not</u> signed more nominating petitions than there are offices for which you are

entitled to vote.

	Printed Name					
	SIGNATURE	(Names that cannot be verified, will not be counted)	Physical Address	County	Ward	Date Signed
		verified, will flot be counted)				
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## AFFIDAVIT OF CIRCULATOR

l,	hereby, certify that I circulated this Petition from			
(Print Nam	ne of Circulator)			
	to	for the Nomination of(Candidate for Office)		
(Date)	(Date)	(Candidate for Office)		
for the position of		and that each person affixing their signature to said		
	(Include Ward if Council	Member Position)		
petition, and to which	n the signer added his	or her address, has stated to me that he or she is a registered elector with		
the municipality and	Ward to which this pe	tition refers		
the municipality, and	ward to which this pe	ition refers.		
		Signature of Circulator		
		Date:		
STATE OF COLORADO	)			
	)ss.			
COUNTY OF LARIMER	)			
Subscribed ar	nd sworn to before me	this, 20 by		
	·			
		Notary Public		
SEAL		My Commission Expires:		