CANDIDATE PETITION Notes: - All information on this form becomes a public record upon receipt by the Supervisor of Elections. - It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, Florida Statutes] - If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form. the undersigned, a registered voter I. (print name as it appears on your voter information card) Nancy M. H. Simpson in said state and county, petition to have the name of placed on the Primary/General Election Ballot as a: [check/complete box, as applicable] ☐ Nonpartisan ☐ No party affiliation ☑ Democratic Party candidate for the office of Florida House District 74 (insert title of office and include district, circuit, group, seat number, if applicable) Date of Birth **Voter Registration Number** Address (MM/DD/YY) Zip Code City County State Date Signed (MM/DD/YY) Signature of Voter [to be completed by Voter] DS-DE 104 (Eff. 09/11) Rule 1S-2.045, F.A.C.

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I,	the undersigned, a registered voter
(print name as it appears on your voter information card)	
in said state and county, petition to have the name of Nancy M. H. Simpson	
placed on the Primary/General Election Ballot as a: [check/complete box, as applicable]	
□ Nonpartisan □ No party affiliation ☑ Democratic Florida House District 74	Party candidate for the office of
(insert title of office and include district, circuit, group, seat number, if applicable)	
Date of Birth or Voter Registration Number (MM/DD/YY) Address	
City	te Zip Code
Signature of Voter	Date Signed (MM/DD/YY) [to be completed by Voter]
Rule 1\$-2.045, F.A.C.	DS-DE 104 (Eff. 09/11)