2008 Arkansas Silver Haired Legislative Session
Official Petition For County Candidate
Form Must Be Returned to AAA by February 29, 2008

Candidate's Name _____ Phone (___)_____

Address_____ City _____ ZIP_____

Signing petition verifies you are 60 or older and a resident of_____County

NAME **Address**

1._____
2._____
3._____
4._____
5._____
6._____
7._____
8._____
9._____
10._____
11._____
12._____
13._____
14._____
15._____
16._____
17._____
18._____
19._____
20._____
21._____
22._____
23._____
24._____
25._____

Form may be detached for mailing/Form may be duplicated