

PETITION

State of South Carolina

County AIKEN

Page must contain signatures of voters from only one county.

P U R P O S E	Candidate	Tom Young	If not candidate petition, enter statement of purpose:	
	Office	S.C. Senate District 24		
	Election Date	November 6, 2012		
	Signature & Printed Name	Residence Address & Phone #	Precinct	VR# & DOB
1	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
2	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
3	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
4	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
5	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
6	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
7	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
8	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
9	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
10	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
11	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>
12	<i>Signature</i>			<i>Voter Registration #</i>
	<i>Print Name</i>			<i>Date of Birth</i>