Independent Nominating Petition

I, the undersigned, do hereby state that I am a registered voter of the political unit for which a nomination for public office is hereby being made, that my present place of residence is truly stated opposite my signature hereto, and that I do hereby nominate the following named persons as candidates for election to public offices to be voted for at the election to be held on the 8th day of November, 2022, and that I select the name Libertarian Party as the name of the independent body making the nominations and the image to the right as the emblem of such body.

Name of Candidate	Public Office	Place of Residence (also Post Office address if not identical)
Howard Rabin	**Member of U.S. Congress, District 3**	88 Virginia Ave., Plainview, NY 11803

I do hereby appoint: Blay Tarnoff 55 Bayview Ave., Port Washington, NY 11050; Randyn Tarnoff 55 Bayview Ave., Port Washington, NY 11050; Caryn Cohen Tarnoff 55 Bayview Ave., Port Washington, NY 11050

as a committee to fill vacancies in accordance with the provisions of the election law.

In witness whereof, I have hereunto set my hand, the day and year placed opposite my signature.

	Date	Name of Signer (printed name may be added)	Residence	Town or City Except in NYC, County
1	/ /2022	X		
	printed name:			
2	/ /2022	X		
	printed name:			
3	/ /2022	X		
	printed name:			
4	/ /2022	X		
	printed name:			
5	/ /2022	X		
	printed name:			
6	/ /2022	X		
	printed name:			
7	/ /2022	X		
	printed name:			
8	/ /2022	X		
	printed name:			
9	/ /2022	X		
	printed name:			
10	/ /2022	X		
	printed name:			

STATEMENT OF WITNESS

I, _____ (name of witness) state: I am a duly qualified voter of the State of New York and now reside at _____ (residence address).

Each of the individuals whose names are subscribed to this petition sheet containing _____ (fill in number) signatures, subscribed the same in my presence on the dates above indicated and identified himself or herself to be the individual who signed this sheet. I understand that this statement will be accepted for all purposes as the equivalent of an affidavit and, if it contains a material false statement, shall subject me to the same penalties as if I had been duly sworn.

_____ Date

_____ Signature of Witness

WITNESS IDENTIFICATION INFORMATION: The following information must be completed prior to filing with the board of elections in order for this petition sheet to be valid.

Town or City: _____ County: _____

Sheet No. _____