Office of the Arizona Secretary of State
Circulator Registration Form

Pursuant to Arizona Revised Statutes (A.R.S) §19-118, all circulators (1) who are not residents of the State of Arizona or (2) who are paid to circulate petitions for statewide ballot measures, must register as circulators with the Office of the Secretary of State prior to circulation. Check which box(es) apply:

☐ I am not a resident of the State of Arizona and, therefore, understand that I must complete and file this form with the Office of the Secretary of State prior to petition circulation.

☐ I am a paid circulator of a petition for a statewide ballot measure and, therefore, understand that I must complete and file this form with the Office of the Secretary of State prior to petition circulation.

Signatures collected prior to registration by any circulator required to register with the Office of the Secretary of State are subject to review and challenge pursuant to applicable laws. Otherwise, if neither statement above is applicable, you are not required to register with the Office of the Secretary of State.

Circulator Name (last, first):	
Circulator's Residential Address (including street number, city, state and zip code):	
Service of Process Address (must be within the State of Arizona):	
Telephone:	E-Mail:

Complete the boxes below for up to three petition types you intend to circulate. Use additional forms if necessary.

Circulating Organization:

Candidate Name or Initiative/Referendum/Recall Petition Serial Number:

Check one box (if county or municipality, specify): ☐ Statewide ☐ County _____ ☐ Municipality _____

Circulating Organization:

Candidate Name or Initiative/Referendum/Recall Petition Serial Number:

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Circulating Organization:

Candidate Name or Initiative/Referendum/Recall Petition Serial Number:

Check one box (if county or municipality, specify): ☐ Statewide ☐ County _____ ☐ Municipality _____

Applicant Attestation:

I, _____ solemnly affirm, under penalty of perjury, that the information
(Print your full name)
provided on this application is true, complete, and correct and that I have read and understand the laws of this State with respect to petition circulation. Furthermore, I agree to submit to the jurisdiction of the State of Arizona regarding any case or controversy arising out of my activities while circulating petitions.

_____ _____
Applicant Signature Date

Election Services Division, Office of the Secretary of State
1700 West Washington, Floor 7, Phoenix, Arizona 85007
(602) 542-8683 or 1-877-THE VOTE

Revised June 11, 2015