



DISTRICT OF COLUMBIA
BOARD OF ELECTIONS
WASHINGTON, DC 20003-4733



NOMINATING PETITION CHALLENGE COVER SHEET

Date: _____

Time: _____

CHALLENGE INFORMATION:

Challenged Candidate: _____

Challenged Candidate's Office Sought: _____

In order for your challenge to be accepted, you must:

- Allege a sufficient number of signature and/or circulator affidavit defects such that, if valid, they would reduce the number of valid signatures below the minimum required for ballot access;
- Identify each challenged signature by name, if legible, petition sheet number, and line number, including instances where all signatures on a petition sheet are being challenged based on the same alleged defect;
- State the legal basis for each challenge by citing the applicable rule or regulation that describes the defect in the petition, petition signature, or circulator affidavit, and provide a clear and concise explanation of the alleged petition or signature defect; and
- Certify that each challenged signature or circulator affidavit has been reviewed in good faith.

If the challenge is not based on the petition's numerical insufficiency, it must identify the specific ballot access requirement (with a citation to applicable rule or regulation) that has not been satisfied. Challenges that do not meet these requirements will not be accepted.

CHALLENGER INFORMATION:

Challenger's Name: _____

Challenger's Address (with Zip Code): _____

Phone No.: _____ **Email Address:** _____

I certify that the information provided in this challenge is true and correct to the best of my knowledge and that the challenge complies with the requirements set forth above. I further consent to service of official Board communications via the email address provided.

Signature of Challenger

SUBMISSION CONFIRMATION:

I acknowledge submission of the items indicated below:

- Nominating Petition Challenge Cover Sheet
- A Challenge Containing _____ Nominating Petition Challenge Form Sheets
- Other Documents: _____

Signature of Challenger or Person Filing

Signature of Board Employee

Complete this section if Filer's information differs from Challenger's information-----

Filer's Name: _____ **Filer's Address:** _____

Filer's Phone No.: _____ **Filer's Email Address:** _____