## IN THE COMMONWEALTH COURT OF PENNSYLVANIA

IN RE: NOMINATION PETITION OF :

GEORGE RATHMELL FOR :
REPRESENTATIVE IN CONGRESS : No. 2022
FROM THE $15^{\mathrm{TH}}$ CONGRESSIONAL :
DISTRICT :
PETITION OF PAT SAYLOR AND
PETITION OF PAT SAYLOR AND : CAROL GINGRICH, OBJECTORS :

## PETITION TO SET ASIDE NOMINATION PETITION

Petitioners/Objectors Pat Saylor and Carol Gingrich, by and through their undersigned counsel, submit this Petition to Set Aside the Nomination Petition of George Rathmell, putative candidate for Representative in Congress from the 15th Congressional District, and in support thereof, aver as follows:

1. The Court has original jurisdiction over this Petition under 42 Pa.C.S. § 764(2).
2. Petitioner/objector Pat Saylor resides at 251 South Center Street in Beavertown, PA 17813 and is a qualified elector of the 15th Congressional District, a registered Republican, and a citizen and taxpayer of the Commonwealth of Pennsylvania.
3. Petitioner/objector Carol Gingrich resides at 122 Egg Hill

Drive in Spring Mills, PA 16875 and is a qualified elector of the 15th Congressional District, a registered Republican, and a citizen and taxpayer of the Commonwealth of Pennsylvania.
4. Respondent George Rathmell resides at 415 Indiana Street, Punxsutawney, Pennsylvania, and purports to be a candidate for Representative in Congress from the 15th Congressional District.
5. On or about March 14, 2022, Respondent Rathmell caused a collection of papers to be filed with the Department of State, Bureau of Elections, which purport to be the Nomination Petition of George Rathmell (the "Rathmell Nomination Petition," or the "Nomination Petition"). True and correct copies of said Nomination Petitions, along with the Candidate Affidavit are attached hereto as Exhibit A.
6. The Nomination Petition, seeks to have the name of George Rathmell certified for nomination at the Republican Primary Election to be held on May 17, 2022, as a candidate for Representative in Congress from the 15th Congressional District, which is comprised of Armstrong, Centre, Cameron, Clarion, Clearfield, Clinton, Elk, Forest, Jefferson,

McKean, Potter, Snyder, Tioga, Union, and Warren Counties, as well as parts of Indiana, Venango, and Lycoming counties.
7. The 15 th Congressional District for which Rathmell seeks the nomination was created on February 23, 2022, after the Pennsylvania Supreme Court adopted a congressional redistricting plan following the decennial census.
8. Notably, because of regional population shifts and the reduction of congressional seats in Pennsylvania, over $40 \%$ of the population in the newest iteration of the 15th Congressional District were previously located in a different district.
9. The Pennsylvania Election Code requires that nomination petitions filed by candidates for Representative in Congress be signed by 1,000 qualified electors. See 25 P.S. § 2872.1(12).
10. The Rathmell Nomination Petition, on its face, contains a total of 1,306 completed signature lines (including approximate 73 lines stricken prior to filing).
11. However, as summarized below the Nomination Petition of George Rathmell must be set aside for at least three discrete reasons: first, the Nomination Petition is not consecutively numbered at the foot
of each page, which is a material defect under the Election Code; second, the occupation field in the preamble of each sheet is inaccurate and misleading, thereby disqualifying the Nomination Petition in its entirety; and third, even if Rathmell is somehow able to overcome these threshold fatal defects, the numerous material defects throughout his Nomination Petition render hundreds of signatures invalid, thereby reducing the total number of signatures he has obtained far below the 1,000 required by the Election Code.

## GLOBAL CHALLENGES

Improper numbering of Nomination Petition in violation of Section 2869 of the Election Code (Global challenge)
12. First, the collection of papers purporting to constitute Rathmell's Nomination Petition contains four unnumbered sheets.
13. Under the Election Code, where a Nomination Petition consists of more than one sheet, "each sheet shall be numbered consecutively beginning with number one, at the foot of each page." 25 P.S. § 2869.
14. As this Court has explained, failure to consecutively number each sheet "is a material error apparent on the face of the petition," under Section 2937 of the Election Code. In re Freeman, 540 A.2d 606,

611 (Pa. Cmwlth. 1988) (citing 25 P.S. § 2937 ("If the objections relate to material errors or defects apparent on the face of the nomination petition or paper, the court, after hearing, may, in its discretion, permit amendments within such time and upon such terms as to payment of costs, as the said court may specify.")).
15. While such a defect may cured, it requires curative evidence presented during a hearing before this Court.
16. Moreover, because these unnumbered sheets are interspersed among those that are numbered and, thus, cannot be segregated, this Court should disallow amendment and declare Rathmell's Nomination Petition defective in its entirety.

## Candidate's misrepresentation of his occupation on Nomination Petition (Global challenge)

17. The preamble on each sheet of the Nomination Petition includes, among other things, the candidate's occupation.
18. Given "the important role that accurate nomination petitions play in achieving the Election Code's goal of an informed electorate freely supporting a candidate of their choice[,]"In re Beyer, 115 A.3d 835, 842 (Pa. 2015), any material omission, embellishment, or
misrepresentation regarding a candidate's occupation renders the nomination petition defective.
19. Presently, on each and every sheet of the Nomination Petition, Rathmell's occupation is listed as an "Army Chaplain, Pastor, Volunteer."
20. However, Rathmell is not currently an Army Chaplain-and has not been for nearly three decades.
21. The Nomination Petition, therefore, misrepresents Rathemell's occupation. See In re Beyer, 115 A.3d 835, 840 (Pa. 2015) (noting that "[a] former occupation is not a current occupation" and holding that a defect in this regard "was both material to an elector's decision to nominate a legislator and incurable by amendment" under the circumstances).
22. Furthermore, because Rathmell's representation in this regard was misleading and knowingly made, it is a fatal defect that may not be cured. See id. at 841 .
OBJECTIONS TO SPECIFIC PAGES

Unnumbered pages (in the alternative to $\mathbb{T \| 1 2 - 1 6}$ supra)
23. Although Rathmell's failure to consecutively number each sheet should render his Nomination Petition invalid in its entirety, to the extent this Court discerns a persuasive basis for avoiding wholesale invalidation, it should nevertheless strike the signatures on the unnumbered pages.
24. Accordingly, 46 signatures should be stricken in the following manner:
a. Lines 1 through 3 on unnumbered page following page 33;
b. lines 1 through 9 on unnumbered sheet preceding page 35 ;
c. lines 1 through 30 on the sheet following page 43 ; and
d. lines 1 through 4 on the sheet following page 53 .

## Defective preamble (Missing District Number)

25. Because the preamble to the Declaration of Electors on pages $2,10,12,51,64$, and 65 of the Nomination Petition does not indicate the congressional district for which Rathmell seeks the Republican nomination, the following signatures are invalid:

| Sheet | Line(s) |
| :---: | :---: |
| 2 | $1-30$ |
| 10 | $1-30$ |
| 12 | $1-15$ |
| 51 | $1-20$ |
| 64 | $1-6$ |
| 65 | $1-2$ |
| Total signatures: 108 |  |

## Defective Circulator Statements-Out of County

26. Pages 72 is defective because the preamble states that the electors are from Jefferson County, while the Circulator's Statement indicates Indiana County; accordingly lines 1 through 10 on Page 72 should be stricken.
27. Pages 95 is defective because the preamble states that the electors are from Armstrong County, while the Circulator's Statement indicates Jefferson County; accordingly lines 1 through 11 on Page 95 should be stricken.
28. Pages 96 is defective because the preamble states that the electors are from Clarion County, while the Circulator's Statement indicates Jefferson County; accordingly, lines 1 through 3 on Page 96 should be stricken.
29. Accordingly, 24 signatures should be stricken on the basis set forth in ब【 26-28 supra.

## Defective Circulator Statement-incomplete statement

30. Pages 37 and 59 are defective because the Circulator's Statement does not include a zip code and, thus, the following signatures are invalid:

| Sheet | Line(s) |
| :---: | :---: |
| 37 | $1-7$ |
| 59 | $1-30$ |
| Total signatures: 37 |  |

Defective Circulator Statement-Circulators without sufficient knowledge to attest to validity of signatures.
31. Although George Rathmell signed the Statement of the Circulators on pages $9,10,11,20,22,23,24,25,26,28,28,29,30,31$, $47,48,50,59,63,64,65,67,68,69$ of his Nomination Petition, he lacked the requisite knowledge to attest to the qualifications of the individuals who affixed their signatures on said pages. See, e.g., In re Nomination of Flaherty, 770 A.2d 327, 336 (Pa. 2001).
32. Specifically, upon information and belief, Rathmell was not present and/or did not personally witness the vast majority of individuals signing the aforementioned pages.
33. An attesting circulator's lacks of requisite knowledge with regard to a significant number of signatories on any single page renders the entire sheet defective and, thus, requires all signatures thereon to be set aside.
34. Accordingly, the following lines, which total 275 signatures, should be stricken:

| Sheet | Line(s) |
| :---: | :---: |
| 9 | $1-30$ |
| 10 | $1-30$ |
| 11 | $1-30$ |
| 20 | $1-29$ |
| 22 | $1-2$ |
| 23 | $1-6$ |
| 24 | $1-4$ |
| 25 | $1-18$ |
| 26 | $1-17$ |
| 27 | $1-6$ |
| 28 | $1-2$ |
| 29 | 1 |
| 30 | 1 |
| 31 | 1 |
| 47 | $1-8$ |
| 48 | $1-4$ |
| 50 | $1-30$ |
| 59 | $1-30$ |
| 63 | $1-9$ |
| 64 | $1-6$ |
| 65 | $1-2$ |
| 67 | $1-5$ |
| 68 | $1-2$ |
| 69 | 1 |
| 83 | 1 |
| Total signatures: 275 |  |

35. Although Daniel Kunselman signed the Statement of the Circulators on pages $1,3,4,6,7,12,13,15,17,18,19,32,33,42,51,55$, $56,57,58,72,73,74,75,84,86,87,88,89$, and 93 of the Nomination Petition, he lacked the requisite knowledge to attest to the qualifications of the individuals who affixed their signatures on said
pages. See, e.g., In re Nomination of Flaherty, 770 A.2d 327, 336 (Pa. 2001).
36. Specifically, upon information and belief, Daniel Kunselman was not present and/or did not personally witness individuals signing the aforementioned pages.
37. An attesting circulator's lack of requisite knowledge with regard to a significant number of signatories on any single page renders the entire sheet defective and, thus, requires all signatures thereon to be set aside.
38. Accordingly, the following lines, which total 411 signatures, should be stricken:
(Table on Next page)

| Sheet | Line(s) |
| :---: | :---: |
| 1 | $1-30$ |
| 3 | $1-30$ |
| 4 | $1-30$ |
| 6 | $1-30$ |
| 7 | $1-30$ |
| 12 | $1-15$ |
| 13 | $1-23$ |
| 15 | $1-30$ |
| 17 | $1-12$ |
| 18 | $1-5$ |
| 19 | 1 |
| 32 | $1-10$ |
| 33 | $1-9$ |
| 42 | $1-9$ |
| 51 | $1-20$ |
| 55 | $1-15$ |
| 56 | $1-15$ |
| 57 | $1-4$ |
| 58 | $1-8$ |
| 72 | $1-10$ |
| 73 | $1-11$ |
| 74 | $1-14$ |
| 75 | $1-4$ |
| 84 | $1-19$ |
| 86 | $1-6$ |
| 87 | $1-2$ |
| 88 | $1-13$ |
| 89 | $1-3$ |
| 93 | $1-3$ |
| Total Signatures: 411 |  |
|  | 1 |
|  |  |
| 18 |  |

## OBJECTIONS TO INDIVIDUAL SIGNATURE LINES

39. In addition to the foregoing defects, at least four hundred signatures are specifically defective and, thus, should be stricken.
40. Pursuant to this Court's Standing Order, the specific grounds for striking each signature are set forth in detail in the accompanying spreadsheet, attached hereto as Exhibit B.
41. Even without accounting for the overlapping objections, set forth in detail above, the striking of the 400 defective signatures for the reasons set forth in Exhibit B, reduces the number of qualified electors on Rathmell's Nomination Petition to 906, which is less than the required 1,000.
42. Accordingly, the Nomination Petition does not contain the statutory minimum of 1,000 signatures of qualified electors from the 15th Congressional District, thereby, rendering said Nomination Petition fatally deficient, invalid, and void.

WHEREFORE, Petitioners/objectors pray the Court enter an order:
(a)Sustaining Petitioners' Objection to the Nomination Petition of George Rathmell and setting aside the Nomination Petition of George Rathmell;
(b)Directing the Secretary of the Commonwealth not to certify the name of George Rathmell for the May 17, 2022 Republican

Primary Election as a candidate for Representative in Congress from $15^{\text {th }}$ Congressional District;
(c) Directing George Rathmell to pay costs and fees of the proceedings pursuant to this Court's discretion under 25 P.S. § 2937;
(d) Granting such further relief as the Court deems necessary and just.

Shohin H. Vance, Esq. (No. 323551)<br>Francis G. Notarianni, Esq. (No. 327461)<br>KLEINBARD LLC<br>Three Logan Square<br>1717 Arch Street, 5th Floor<br>Philadelphia, PA 19103<br>(215) 568-2000<br>Eml: svance@kleinbard.com fnotarianni@kleinbard.com<br>Counsel for Petitioners/objectors

Dated: March 22, 2022

## CERTIFICATE OF SERVICE

I hereby certify that I am this day serving the foregoing document
upon the persons and in the manner indicated below, which service satisfies the requirements of Pa.R.A.P. 121 and the Pennsylvania Election Code:

Via Hand Delivery
Secretary of the Commonwealth
Pennsylvania Department of State
401 North Street
Harrisburg, PA 17120
Via Overnight Federal Express
George Rathmell
415 Indiana Street, Punxsutawney, PA 15767

Dated: March 22, 2022
Is/ Shohin H. Vance, Shohin H. Vance, Esq. (No. 323551) KLEINBARD LLC
Three Logan Square
1717 Arch Street, 5th Floor
Philadelphia, PA 19103
(215) 568-2000

Eml: svance@kleinbard.com
Counsel for Petitioners / objectors

## VERIFICATION

I, Carol Gingrich, verify that the statements made in the foregoing Petition to Set Aside are true and correct based upon my personal knowledge or information and belief. I understand that false statements therein are subject to penalties of 18 Pa.C.S. $\S 4904$, relating to unsworn falsification to authorities.

Dated: March 22, 2022


## VERIFICATION

I, Pat Saylor, verify that the statements made in the foregoing Petition to Set Aside are true and correct based upon my personal knowledge or information and belief. I understand that false statements therein are subject to penalties of 18 Pa.C.S. $\S 4904$, relating to unsworn falsification to authorities.

Dated: March 22, 2022


## EXHIBIT A

| CANDIDATES | PENNSYLVANIA DEPARTMENT OF STATE <br> BUREAU OF ELECTIONS <br> 210 NORTH OFFICE BLDG. <br> HARrISBURG, PA 17120 | OFFICE USE ONLY |
| :---: | :---: | :---: |
| 202200215 |  |  |

Name: Rathmell $\qquad$ , Irvin

First Name
Middle Name or Initial ' $\xrightarrow[\text { Suffix }]{ }$

Residential Address: 415 Indiana Street
Street Address

City: Punxsutawney State: PA Zip Code: 15767

Municipality (City, Bro, or Township): Punxsutawney

415 Indiana Street
Street Address

City: Punxsutawney
State: PA _ Zip Code: 15767

Voting Precinct Name (including Ward \& Division, if applicable): PA-15, Punxsutawney Boro 02-2300

Office for which you are seeking nomination: REPRESENTATIVE IN CONGRESS
District Number (if applicable): - 15

Email address: opportunities@reagan.com

Name as it is to appear on the Ballot: George Rathmell

CANDIDATE AFFIDAVIT - I do swear (or affirm) that my residence, my election district and the title of the office for which I desire to be a candidate are as specified above, that I am eligible for said office, that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring preelection and post-election reporting of campaign contributions and expenditures; that unless 1 am a candidate for Judge of a Court of Common Pleas, the Philadelphia Municipal Court or the office of school board in a district where that office is elective or the office of magisterial district judge, my name has not been presented as a candidate by nomination petitions of any other party for the same office; that if I am a candidate for any office of a political party I am a registered and enrolled member of such party; that if I am a candidate for Committee Delegate or Alternate Delegate to the National Convention the name of the candidate to whom I am committed is as indicated on my nomination petition and that my signature on the Delegate's Statement was affixed to each page of my nomination petition prior to circulation of same; that I am not a candidate for an office which I already hold, the term of which is not set to expire on the same year as the office subject to this affidavit.

Sworn to and subscribed before me this

$5 / 23 / 25$ Commonweal it of Pennsylvania - Notary Seal
My commission expires

I swear (or affirm) to the above part(s) as required by the laws) applicable to the office I am seeking.


Member, Pennayivani Association of Notaries




A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: . - 15
YEAR OF PRIMARY: 2022
"CANDIDATE'S NAME(PRINT OR TYPE NAME): • George Rathmell :
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: . 415 Indiáná Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth.above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$. $\S 4904$ (relating to unsworn falsification to authorities).


ATTENTION:
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: -
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefresin PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



STATEMENT OF CIRCULATOR
I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

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1 County of Petition-Signers' Residence Jefferson

2 Printed Name of Circulator Rebecca L. Kunselman
Relecsa 1. Munselm
3 Signature of Circulator
4 Number and Street of Circulator 7358 Porter
5 City, Borough or Twp. $\qquad$ Perry Zip Code $\qquad$ 15767

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.
NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY:` 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET. ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP: : Punxsutawney
COUNTY OF SIGNERS: $\delta$ efferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
$\dot{W} e$, the undersigned, all of whom severally declare that we are qualified electors of the County and the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as. set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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 5 City, Borough or Twp. Perry Zip Code 15767

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RESIDENTIAL STREET ADDRESS: 415 Indiana Street
'CITY, BOROUGH ORTWP.: Punxsutawney,
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To. the SECRETARY OF THE COMMONWEALTH:
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We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



STATEMENT OF CIRCULATOR
CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

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1 County of Petition-Signers' Residence Jefferson

2 Printed Name of Circulator
Rebecca L. Kunseliman
3 Signature of Circulator $\qquad$
4 Number and Street of Circulator 1358 Porter 5 City, Borough or Twp. $\qquad$ Zip Code $\qquad$ 15767

Commonwealth of Pennsylvania DEPARTMENT OF STATE

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B. PI path er provided with this petition for detailed information about completion of .. this form:…


NAME OF OFFICE: REPRESENTATIVE IN.CONGRESS
DISTRICT NUMBER: : 15
YEAR OF PRIMARY: 2022
$\qquad$
$\qquad$
$\qquad$
CANDIDATE'S NAME(PRINTOR TYPE NAME): "George Rathmell"
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: ` 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney

To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent. herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as , set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein sis true and correct to the best．of my knowledge，information and belief，and that this statement is made： subject to the penalties of 18 Pa．C．S．$\$ 4904$（relating to unsworn falsification to authorities）．
1 county of Petition－Signers＇Residence Jefferson
2 Printed Name of Circulator Daniel，S．Kunselman
3 Signature of Circulator
4 Number and street of circulator 7358 Porter Rd．
5 City，Borough or Twp． $\qquad$ Perry Zip Code $\qquad$ 15767

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, 1 state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$. $\S 4904$ (relating to unsworn falsification to authorities).


Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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1 County of Petition -Signers' Residence .. . 5 EFEFESSON
2 Printed Name of Circulator George $\gamma$ athenell
3 Signature of Circulator
4 Number and Street of Circulator 415 Indiana st
5 City, Borough or Twp. Puny sur au, hey $\qquad$ 15767

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: -
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $\& E F F F R S O N$ party of SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



STATEMENT OF CIRCULATOR.
I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the content knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, 1 state the information set forth.herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\mathbf{5} 4904$ (relating to unsworn falsification to. authorities).
: 1 County of Petition-5igners' Residence $\quad \triangle E F E F R S Q O N$
2 Printed Name of Circulator
George Ruthmell
3 Signature of Circulator $\qquad$ ar z Rus
4 Number and street of circulator 415 Indiana $S T$.
5 City, Borough or Twp. Pu Zip Code 15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: -
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Clarion PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: . Punxsutawney
COUNTY OF SIGNERS:


PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: ${ }^{\text {Punxsutawney }}$
COUNTY OF SIGNERS: Jefferson

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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1 County of Petition-Signers' Residence Jefferson,

4 Number and Street of circulator 7358 Porter 5 City, Borough or Twp: $\qquad$ Perry Zip Code

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney COUNTY OF SIGNERS: Jefferson

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
"We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political -district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain,' Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: ' 415 Indiana Street
CITY, BOROUGH OR TWP.: Punx́sutawney
COUNTY OF SIGNERS: JefferkSOn PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).

1. County of Petition-Signers' Residence" . Lefferson 2 Printed Name of Circulator $\qquad$ Barbara Mohues 3 Signature of Circulator 4 Number and Street of Circulator 417 albion REL Bell Twp Rb cos - 15767

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jeffersan PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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| STATEMENT OF CIRCULATOR $\quad$ CIRCULATOR SHOULD COMPLETE |  |  |  |  |  |  |
| I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below. |  |  |  |  |  |  |
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## Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Clecurfield PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made


NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Armstrong PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  | DATE OF SIGNING |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| STATEMENT OF CIRCULATOR $\quad$ CIRCULATOR SHOULD COMPLETE |  |  |  |  |  |  |
| I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below. |  |  |  |  |  |  |
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Commonwealth of Pennsylvania
. . DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of $\therefore$ this form.
NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: (lecursteld PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Clear field PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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Further, 1 state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).

1 County of Petition-Signers' Residence $\qquad$ Clear FIEID

2 Printed Name of Circulator
3 Signature of Circulator $\qquad$
4 Number and Street of Circulator 137 East washing to N Ave 5 City, Borough or Twp. $\qquad$ DuBois Zip Code $\qquad$ 15801
－OFFICIAL USE ONLY

ATTENTION！
A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only，
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS－
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street

## CITY，BOROUGH OR TWP．：Punxsutawney

county of signers：Clearfield party of signers：republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.
Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 94904 (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence test Cosicield
2 Printed Name of Circulator $($ Eccv-c) $)$ )athmeY
3 Signature of Circulator


4 Number and Street of circulator 415 I indie we 51
5 City, Borough or Twp. Pun suteuintp zip code 1.5767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.


Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only,
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $C E A R$ FIGARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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3 signature of Circulator $C$
4 Number and Street of Circulator 415 Fud，any St
5 City，Borough or Twp．Pu $x \times$ sutalunef zip code 157 le 7

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Commonwealth of Pennsylvania
DEPARTMENT OF STATE

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YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
cOUNTY OF SIGNERS: Clearfield PARTY OF SIGNERS: Republican
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Commonwealth of Pennsylvania DEPARTMENT OF STATE

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DISTRICT NUMBER: - 15
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OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: PLK PARTY OF SIGNERS: Republican
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1 County of Petition-Signers' Residence $\mathcal{A F F F F R S E A O L}$
2 Printed Name of Circulator
3 Signature of Circulator
4 Number and street of circulator 415 Indiana St
5 City, Borough or Twp. $\qquad$ punssutawney Zip Code $\qquad$ 15767

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only,
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: LNDIANA PARTY OF SIGNERS: Republican
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Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: ! 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: IND/ANA PARTY OF SIGNERS: Republican
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## Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: A $A S T R O W G$ PARTY OF SIGNERS: Republican

## To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



| CIRCULATOR SHOULD COMPLETE |
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I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

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1 County of Petition－Signers＇Residence $\downarrow$ 解
2 Printed Name of Circulator George 2 athmell
3 Signature of Circulator


4 Number and Street of Circulator 415 I ndicind


NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

## Commonwealth of Pennsylvania

 DEPARTMENT OF STATEATTENTIONI
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER:
$\cdot 15$
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: CENTRE PARTY OF SIGNERS: Republican

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| Signature | PRINTED NAME of ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence 1 esfersetre Centre
1 County of Petition-Signers' Residence tors ed 2 Printed Name of Circulator George
3 Signature of Circulator


4 Number and Street of Circulator 415 Indiana
5 City, Borough or Twp.
 Zip Code 15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## ATTENTION！

A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
countr of sioners：LY CO MING PaRtr of signers：Repulican
To the SECRETARY OF THE COMMONWEALTH：
We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No． | Street or Road | City，Boro or Twp． |  |
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| 品最回 DSBE-SC(12/19) | Department of State |  |  | Page 30 $\qquad$ |  |



I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．
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2 2mmenesmeneoctrinasuar George Rathmell
 4 Number and Street of Circulator 415 Indiana 5 City，Borough or Twp．Hunxcufawney $\qquad$ 15767

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: VENANGOPARTY of SIGNers: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME of ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| 虽昶 DSBE-SC(12/19) | Department of State $\|\\|\|\|\|\|\| \|$ | \||||| | \|TV|||||||||| | \||| Page_31 |  |



## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).


3 Signature of Circulator

## 4 Number and Street of Circulator 415 Indiceng st

5 city, Borough or Twp. Pu xx sudan nyy_zip code 15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATIOǸ: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney COUNTY OF SIGNERS: Clearfield

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set. forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Indiana
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| STATEMENT OF CIRCULATOR <br> I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below. <br> Further, I state the information set forth herein is true and correct to the best of myowledge, information and belief, änd that this statement is made <br>  |  |  |  |  |  |  |

## Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 5
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jeffersan
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth abo've, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certifjed to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$. $\S 4904$ (relating to unsworn falsification to authorities).


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## ATTENTION!

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only,
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: ArWStrong PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.




Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Indiana PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 5
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: • Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson party of signers: republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



| CIRCULATOR SHOULD COMPLETE |
| :---: | :---: |
| $1-5$ BELOW |

I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further， 1 state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S．$\S 4904$（relating to unsworn falsification to authorities）．
1 County of Petition－Signers＇Residence Jefferson
2 Printed Name of circulator Rebecca Runselman
4 Number and Street of Circulator 7358 Porter
5 City，Borough or Twp． $\qquad$ Zip Code $\qquad$

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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## Commonwealth of Pennsylvania

## DEPARTMENT OF STATE

ATTENTIONI
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Clarion PARTY OF SIGNERS: Republican

## To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence O|rinion
2 Printed Name of Circulator Jessica Lee Smith
3 Signature of circulator suadec to s Smith
4 Number and Street of Circulator 432 Gand SRO
5 City, Borough or Twp.


Zip Code
15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania

OFFICIAL USE ONLY

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Indiana
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

| SIGNATURE OF ELECTO | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| 僦荤 DSBE-SC(12/19) | Department of State | \||||||| | $\|\|\|\|\|\|\|\|l\|$ | Page 4 |  |



I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\S 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence Indiana
2 Printed $N a m e$ of circulator Jessica tee smith
4 Number and Street of circulator 432 G and S RD
5 city, Borough or Twp. Perry Twp zip code 1S7 H7

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only,
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson Party of signers: republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $£ 4904$ (relating to unsworn falsification to authorities).


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Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER:. 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NÀME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $\square$ Jefferson

PARTY OF SIGNERS: Republican.
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



II state that I am a qualified elector of the Commoniweaith；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S．$\$ 4904$（relating to unsworn falsification to authorities）．

1 County of Petition－Signers＇Residence $\qquad$ Jefferson Barbara Mohney
2 Printed Name of Circulator $\qquad$ Barbara money
417 Albion Rd
4 Number and Street of Circulator $\qquad$
5 City，Borough or Twp． $\qquad$ Punsutwney zip Code $\qquad$ 15767

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jeffercio PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the"Year and Office set forth above.



## Commonwealth of Pennsylvania DEPARTMENT OF STATE

## ATTENTION！

A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
COUNTY OF SIGNERS：INDIAHA PARTY OF SIGNERS：Republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the Country Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said．Party，for the Year and Office set forth above．

|  | PRINTED NAME of ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $11$ |  | House No． | Street or Road | City，Boro or Twp． |  |
| $\text { 1. hylind } x \sqrt{n}$ | Lernoer yoder | 5744 | 10Ckuate | Rossiter | 3－5－22 |
| 2．Melum or oxdth | Allen m，Yodur | 5744 | 10ckual | Rossiter | 3－6－22 |
| 3．Clunsen y elfu | christephen Yodr | 5244 | 10ckuale | nossiter | $3-6-22$ |
| 4．Gerace yodu | Elua ci yoder | 5744 | 10Ckuah | nossloer | $3-7-27$ |
| 5．Redr hoth $\because R$ | Leardu li yoder JR | 5744 | lockuale | Rossita | $3-7-22$ |
| 6. |  | 574 | lockuan | Rossita |  |
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| 回回 DSBE•SC（12／19）倥要家 |  |  |  |  |  |



## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE
1－5 BELOW

I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S．$\$ 4904$（relating to unsworn falsification to authorities）．
1 County of Petition－Signers＇Residence IndiAnA
2 Printed Name of Circulator LEANDER YO』ER
3 Signature of Circulator
4 Number and Street of Circulator 5744 socle val nd 5 City，Borough or Twp．Rossite Ba 15772 Zip Code 15772

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 5
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS Indiana PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.




I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

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1 County of Petition－Signers＇Residence In di icing
2Pirined dene of cirulutar George Ruthmall
3 Signature of Circulator


4 Number and Street of Circulator 415 Ivdicile $S C$ 5 City，Borough or Twp．Pu h Hes etavinuey Zip code $\angle 576\rangle$

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $J$ escersan PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEAL.TH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

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1 County of Petition－Signers＇Residence ste friesian 2 Printed Name of Circulator Levis e Ruthmell
3 Signature of Circulator
4 Number and Street of circulator 415 Indiesia $5+$
5 City，Borough or Twp．fixinxsitanumey，$\quad$ Zip code 15767

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS:Clearfield PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $\dot{C}\left|\ell t i f_{i} \ell\right| C \mid$ PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of -Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S．$\S 4904$（relating to unsworn falsification to authorities）．

1 County of Petition－Signers＇Residence CLEARFIELD
2 Printed Name of Circulator coarse Roshnoul．
3 Signature of Circulator $\qquad$ Cos Mutes．
4 Number and Street of Circulator 415 I ndicunel St．
5 City，Borough or Twp． $\qquad$ punssutaviny Zip Code $\qquad$ 15767

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS

YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $E l / \lll<A R T Y$ OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15 +h
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: $E / / C$
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: is 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: FORES ${ }^{7}$
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$. $\S 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence Folks t
4 Number and Street of Circulator 5 City, Borough or Twp. BaRNEtt Zip code 16239

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.


## Commonwealth of Pennsylvania

 DEPARTMENT OF STATEOFFICIAL USE ONLY

ATTENTION！
A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
countr of sineres：Clearfield
PARTY OF SIGNERS：Republican
To the SECRETARY OF THE COMMONWEALTH：
We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

| SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No． | Street or Road | City，Boro or Twp． |  |
| 1．Antatiouncatos | Autum monaco | 22 | Melane | DuBois | $2 / 2 \times 5 / 22$ |
| 2．Cutiá Bashtine | Julia Bashline | 38 | Lakeview Dr | Dubois | 2／28／22 |
| 3．Eason Sentioc | Jason Senior | 38 | Lakeview de DuBois |  | 2／28／22 |
| 4．Brandon Connoz | Brandon Connor | 349 | Lewis sitreet | Reynolds ville | 2／38／22 |
| 5. |  |  |  |  |  |
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Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: ArMstrong PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



DEPARTMENT OF STATE

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL. STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsuțawney
COUNTY OF SIGNERS:
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: • 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney COUNTY OF SIGNERS: Elarion

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No. | Street or Road | City, Boro or Twp. |  |
| 1. | ol Renarigu. | Staci Renn | 51 | Mitehellu | Strattaniville | $3\|2\| 22$ |
| 2. |  | Nancee Milo | $35$ | dnoodst | Clarion | $312102$ |
| 3. |  | Amanda Aa | 602 | maplest | Newsethlehem | $3 / 2 / 22$ |
| 4. | nelle adam | michelle Adar | $215$ | Relfedeodo | Clerson | $3-4-22$ |
| 5. |  |  |  |  |  |  |
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|  | E-SC(12/19) |  |  |  |  |  |



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
cOUNTY OF SIGNERS: $\bar{k} \cdot f f e r s o n$
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that 1 am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.
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NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Le fferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballotof said Party, for the Year and Office set forth above.



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STATEMENT OF CIRCULATOR
CIRCULATOR SHOULD COMPLETE 1-5 BELOW

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Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 94904 (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence_ id esters on
2 Printed Name of circulator seorser athmeti
$\qquad$ Coarse Rathmell
3 Signature of Circulator 415 Indraina
4 Number and Street of Circulator 415 Indiana
5 City, Borough or Twp. Punyscotalney Zip Code $\qquad$

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

# Commonwealth of Pennsylvania 

DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney

## county of signers: Clearfield. party of signers: republican

## To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| 3. Warbara sifocl | Barbara Siford | 17 | West ${ }^{\text {th }}$ | Burnside | $3 / 6,202$ |
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|  | Department of state $\mid$ |  | $\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\mid$ | $\\|\\|\\|\\|\\| \text { Page } 60$ |  |



ATTENTION!
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS:_nduana PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
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DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: FFFERSON PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## Commonwealth of Pennsylvania

 DEPARTMENT OF STATEATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: -
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: C LEARFIELD party of signers: " Republican
To the SECRETARY OF THE COMMONWEALTH:
We; the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent " herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| STATEMENT OF CIRCULATOR |  |  |  |  | CIRCULATOR SHOULD COMPLETE 1.5 BELOW |  |

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$. $\S 4904$ (relating to unsworn falsification to authorities).


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: -
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Andrana PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$ ．$\S 4904$（relating to unsworn falsification to authorities）．
1 County of Petition－Signers＇Residence It 2 Printed Name of Circulator 3 Signature of Circulator
5 City，Borough or Twp．Punxsistceluncef
Zip code 15767

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney county of signers: Centre

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as . set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.
SIGNATURE OF ELECTOR


I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

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Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: fefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## Commonwealth of Pennsylvania DEPARTMENT OF STATE

## ATTENTION

A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
COUNTY OF SIGNERS：IND／ANA PARTY OF SIGNERS：Republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

| SIGNATURE OF ELECTOR | $\begin{aligned} & \text { PRINTED NAME } \\ & \text { OF ELECTOR } \end{aligned}$ | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
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|  | Department of State |  |  | $\text { Page } 68 \mathrm{si}$ |  |



## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1-5 BELOW

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\S 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence itvidicinc
2 Printed Name of Circulator


Ruthmell
3 Signature of Circulator


4 Number and Street of Circulator 415 Indices $S X$
5 City, Borough or Twp. $\qquad$ Zip code 15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania

OFFICIAL USE ONLY

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jeffersen PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set : forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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|  | Department of State | $\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\|\mid$ |  | $\\|\\|\\|\\| \text { Page. } 69$ |  |



## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\$ 4904$ (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence. Je-freersom
2 Printed Name of Circulator
Gears Ruthmell
3 Signature of Circulator


4 Number and Street of Circulator 415 Inditing ST
5 City, Borough or Twp. Dunks ofawnves
Zip Code


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: CLEAR FIELD PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## ATTENTION！

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NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
COUNTY OF SIGNERS：Cl．ecu－S゙1 el PARTY OF SIGNERS：Republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No． | Street or Road | City，Boro or Twp． |  |
| 1．府抑 |  | 71 | Cor | Sury | 53853 |
| 2. Nicole Spencer) | Nicole Spencer | 209 | Price Farmlane | Mahaffey | 2－25－22 |
| $\qquad$ <br> 3. | willionT，Aughos | 242 |  | LaJose | $2-2922$ |
| 4．Const Cow | Curtis EChambers | 216 | Hughes in | La Jose | $2-2 \gamma-22$ |
| Shem,Sech | Brian Beck | 2195 | Sylused Ehermytree |  | 3－3－22 |
| 6. | Rowald Lecois | 6704 | mahaffey Gramp．Any | Mahaffey | 3－6－22 |
| 7．Yenag bewis | Gena Lewis | 67.04 | mahaffiy Grampean thw | Mahaffep | $36-22$ |
| 8. | Danief Dimmick | 104 | Bellwoc．l Rd | malaffe | $3-10 .-22$ |
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|  | Department of State <br> ill｜ $\qquad$ |  |  |  |  |



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No． | Street or Road | City，Boro or Twp． |  |
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## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1－5．BELOW

I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．

Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$ ．$\varsigma 4904$（relating to unsworn falsification to authorities）．


NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No． | Street or Road | City，Boro or Twp． |  |
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I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below．
Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S}$ ．$\S 4904$（relating to unsworn falsification to authorities）．


Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION I
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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## Commonwealth of Pennsylvania

 DEPARTMENT OF STATE
## ATTENTIONI

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Indiana
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



## STATEMENT OF CIRCULATOR

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$\square$

Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS.
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jetton Party of signers: republican
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We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


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|  | OF ELECTOR | House No． | Street or Road | City，Bora or Twp． |
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## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE 1－5 BELOW

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Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S． 54904 （relating to unswom falsification to authorities）．
1 County of Petition－Signers＇Residence
2 Printed Name of circulator Repecca Kynselman
3 Signature of Circulator


4 Number and Street of Circulator
7358 Porter Rd
5 City，Borough or Twp．


Zip Code $\qquad$

NOTE：THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED．

Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: 'Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jefferson PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political 'Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.
SIGNATURE OF ELECTOR



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of , this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell.
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $\angle L E A P F(E L D$ PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above; that we are registered and enrolled members of the Political Party set forth above, and have signed no petition. inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: ; 2022
CANDIDȦTE'S NAME(PRINT OR ṪYPE NAME): "George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY BOROUGH OR TEMP COUNTY OF SIGNERS: Clearfield PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION I
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT' OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $C L E A R F I E L I$ PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



1. state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.
Further, I state the information set forth herein is true and correct to the best of knowledge, subject to the penalties of 18 Pa.C.S. $\S 4904$ (relating to unsworn falsification to authorities).
. 1 County of Petition-Signers' Residence $\qquad$ Clearfield 2 Printed Name of, Circulator Thomas A. Coulter

3 Signature of Circulator Thomas A Coulter

4 Number and Street of Circulator 1855 Harper Mine Road 5 City, Borough or Twig. $\qquad$ Curwensville, Pa. Zip Code $\qquad$ 16833

Commonwealth of Pennsylvania DEPARTMENT OF STATE
. ATTENTION
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Indiana party of signers: republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


|  | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
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| Furthe subjec <br> 1 Cou <br> 2 Prin <br> 3 Sign <br> 4 Num <br> 5 City | tate the information set forth he penalties of 18 Pa.C.S. 5 <br> Petition-Signers' Residence Name of Circulator of Circulator $\qquad$ and Street of Circulator ough or Twp. $\qquad$ | and correct to the to unsworn falsifica <br> ana <br> Kunselima <br> Bungelm <br> Purter <br> T MUST BE COMPL | my knowledge uthorities). <br> ip Code $\square$ <br> ER ALL SIGNA | information and $767$ <br> URES HAVE BEEN | f, and that this statem <br> AINED. | t is made |

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS:CLERRFIEL(PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.
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## Commonwealth of Pennsylvania DEPARTMENT OF STATE

OFFICIAL USE ONLY

ATTENTIONI
A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
COUNTY OF SIGNERS：Jeffersou PARTY OF SIGNERS：Republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or．Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No． | Street or Road | City，Boro of Twp． |  |
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## STATEMENT OF CIRCULATOR

CIRCULATOR SHOULD COMPLETE
1-5 BELOW
I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

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2 Printed Name of Circulator verve hachmell
3 Signature of Circulator


4 Number and Street of Circulator 415 Indicuce $S t$
5 City, Borough or Twp. Wu 2 sciturny
Zip Code 15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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## Commonwealth of Pennsylvania DEPARTMENT OF STATE

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NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Incliana PARTY OF SIGNERS: Republican
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1 County of Petition-Signers' Residence Indiana
2 Printed Name of Circulator

- Repecca Kunselman

3 Signature of Circulator Rubella Murjelman
4 Number and street of Circulator 7358 Porter
5 City, Borough or Twp.
 Zip Code

1576

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania DEPARTMENT OF STATE

## ATTENTION!

A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
courri of sicuers: Jcfferion
PARTY OF SIGNERS: Republican

## To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualifjed electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  |  | ADDRESS WHERE REGITTRED AND ENROLLED |  |  |  |
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|  | of Elector | House No. | Street or Road | City, Boro or Twp. |  |
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| 14. |  |  |  |  |  |
|  | Department of state \|||||||||||||| | \|||||||| | \||||||||||||||||||| | \|||||||| Page 86 |  |



I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.
Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. $\S 4904$ (relating to unsworn falsification to authorities).


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.


## Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: • 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: Jeffersol PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Jefferson party of signers: republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


1456


## STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.
Further, 1 . state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL. SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania

 DEPARTMENT OF STATEATTENTION!
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: • 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Armstrong party of signers: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of $18 \mathrm{~Pa} . \mathrm{C} . \mathrm{S} . ~ \S 4904$ (relating to unsworn falsification to authorities).


NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION I
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: 'Indiana
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


STATEMENT OF CIRCULATOR

I state that I am a qualified elector of the Commonwealth; that 1 am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

Further, I state the information set forth herein is true and correct to the best of my knowledge, information and belief, and that this statement is made subject to the penalties of 18 Pa.C.S. 54904 (relating to unsworn falsification to authorities).
1 County of Petition-Signers' Residence Indiana
2 Printed Name of Circulator


3 Signature of Circulator


4 Number and Street of circulator 7358 Porter
5 City, Borough or Twp.
 Zip Code

## Commonwealth of Pennsylvania

 DEPARTMENT OF STATEATTENTION!
A. This Petition may be used to subnit for Nomination the Name of One Candidate for One Office Only,
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Indiana party of signers: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

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## Commonwealth of Pennsylvania

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
county of signers: Clearfield party of signers: Republican

## To the SECRETARY OF THE COMMONWEALTH:

We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.

|  | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No. | Street or Road | City, Boro or Twp. |  |
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| 题覌 DSBE-SC(12/19) | Department of State | \||||||||||||||||| | \|||||||||||||||||||||||| | $\text { Page } 92$ |  |



I state that I am a qualified elector of the Commonwealth; that I am duly registered and enrolled as a member of the political party designated in this nomination petition; that my residence is as set forth below; that the signers to the foregoing petition signed the same with full knowledge of the contents thereof; that their respective residences are correctly stated therein; that each signed on the date set opposite his or her name; that to the best of my knowledge and belief, the signers are qualified electors, duly registered and enrolled members of the political party and of the political district designated in this petition, and that they are residents in the County specified in number one below.

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1 County of Petition-Signers' Residence Cleartield
2 Printed Name of Circulator
Repecca Kunselman
3 Signature of Circulator


4 Number and Street of Circulator 7358 Porter
5 City, Borough or Twp. Perry
Zip Code
15767

NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.

## Commonwealth of Pennsylvania DEPARTMENT OF STATE

ATTENTIONI
A. This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only.
B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP:: Punxsutawney
COUNTY OF SIGNERS: Clarion
PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



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NOTE: THIS STATEMENT MUST BE COMPLETED AFTER ALL SIGNATURES HAVE BEEN OBTAINED.
$\therefore:$

Commonwealth of Pennsylvania
DEPARTMENT OF STATE

ATTENTION!
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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney cOUNTY OF SIGNERS: Jefferson

PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.



Commonwealth of Pennsylvania
$\therefore$ ' DEPARTMENT OF STATE

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B. Please refer to the instruction page provided with this petition for detailed information about completion of this form.

NAME OF OFFICE: REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER: - 15
YEAR OF PRIMARY: 2022
CANDIDATE'S NAME(PRINT OR TYPE NAME): George Rathmell
OCCUPATION: Army Chaplain, Pastor, Volunteer
RESIDENTIAL STREET ADDRESS: 415 Indiana Street
CITY, BOROUGH OR TWP.: Punxsutawney
COUNTY OF SIGNERS: $\triangle R M S T R O W C$ PARTY OF SIGNERS: Republican
To the SECRETARY OF THE COMMONWEALTH:
We, the undersigned, all of whom severally declare that we are qualified electors of the County and of the political district set forth above, that we are registered and enrolled members of the Political Party set forth above, and have signed no petition inconsistent herewith, do hereby petition the Secretary of the Commonwealth to have the candidate whose Name, Occupation and Residence are as set forth above, certified to the County Board of Elections of said County or Counties in said District, to be printed on the Primary Ballot of said Party, for the Year and Office set forth above.


| $\begin{aligned} & \hline \hline \text { 符口 } \\ & \text { 等號 } \end{aligned}$ | SIGNATURE OF ELECTOR | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | House No． | Street or Road | City，Boro or Twp． |  |
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| 30. |  |  |  |  |  |  |
| STATEMENT OF CIRCULATOR $\quad \begin{gathered}\text { CIRCULATOR SHOULD COMPLETE } \\ 1.5 \text { BELOW }\end{gathered}$ |  |  |  |  |  |  |
| I state that I am a qualified elector of the Commonwealth；that I am duly registered and enrolled as a member of the political party designated in this nomination petition；that my residence is as set forth below；that the signers to the foregoing petition signed the same with full knowledge of the contents thereof；that their respective residences are correctly stated therein；that each signed on the date set opposite his or her name；that to the best of my knowledge and belief，the signers are qualified electors，duly registered and enrolled members of the political party and of the political district designated in this petition，and that they are residents in the County specified in number one below． |  |  |  |  |  |  |
| Further，I state the information set forth herein is true and correct to the best of my knowledge，information and belief，and that this statement is made subject to the penalties of 18 Pa．C．S．$\S 4904$（relating to unsworn falsification to authorities）． |  |  |  |  |  |  |
| 1 County of Petition－Signers＇Residence Tefferson$\qquad$ |  |  |  |  |  |  |
| 3 Signature of Circulator Ahang Barnett$\qquad$ 4 Number and Stree of circulatoon PIM Perry Stneet 5 City，Borough or Twp． $\qquad$ Pumaritadoney $P_{A}$ Zip Code $\qquad$ 15767 |  |  |  |  |  |  |

## Commonwealth of Pennsylvania DEPARTMENT OF STATE

OFFICIAL USE ONLY

ATTENTION！
A．This Petition may be used to submit for Nomination the Name of One Candidate for One Office Only．
B．Please refer to the instruction page provided with this petition for detailed information about completion of this form．

NAME OF OFFICE：REPRESENTATIVE IN CONGRESS
DISTRICT NUMBER：－ 15
YEAR OF PRIMARY： 2022
CANDIDATE＇S NAME（PRINT OR TYPE NAME）：George Rathmell
OCCUPATION：Army Chaplain，Pastor，Volunteer
RESIDENTIAL STREET ADDRESS： 415 Indiana Street
CITY，BOROUGH OR TWP．：Punxsutawney
COUNTY OF SIGNERS：$C L A M(O N$ PARTY OF SIGNERS：Republican

## To the SECRETARY OF THE COMMONWEALTH：

We，the undersigned，all of whom severally declare that we are qualified electors of the County and of the political district set forth above，that we are registered and enrolled members of the Political Party set forth above，and have signed no petition inconsistent herewith，do hereby petition the Secretary of the Commonwealth to have the candidate whose Name，Occupation and Residence are as set forth above，certified to the County Board of Elections of said County or Counties in said District，to be printed on the Primary Ballot of said Party，for the Year and Office set forth above．

| 或駺吅 | PRINTED NAME OF ELECTOR | ADDRESS WHERE REGISTERED AND ENROLLED |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | House No． | Street or Road | City，Boro or Twp． |  |
| 1. | Rysn Sossong | 694 | Wood | New Bethlehem | $03 / 07 / 202 \alpha$ |
| 2. Re lap aclec | Revaelacker | 282 | N．Cocher | Corsica | $3 / 7 / 22$ |
| 3. $\qquad$ | Tracy L．Durish | 125 | 5．8 $8^{\text {th }}$ Ave | Clarion． | $3113122$ |
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## EXHIBIT B








| B | C | D | E | F | F G | H | I | J | K | L | M | N | 0 | P | Q | R | S |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 18 | Jefferson |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 17 | Jefferson |  |  |  |  |  |  |  |  | x |  |  |  |  |  |  |  |
| 9 | Jefferson | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 9 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 8 | Jefferson |  |  |  |  |  |  |  |  | x |  |  |  |  |  |  |  |
| 7 | Jefferson |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 5 | Jefferson |  |  |  |  | x |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 11 | Jefferson |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 19 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 3 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 1 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 14 | Jefferson |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 13 | Jefferson |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 30 | Jefferson |  | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 | Indiana |  |  |  |  |  |  |  |  | x |  |  |  |  |  |  |  |
| 4 | Indiana |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 3 | Indiana |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 2 | Indiana |  |  |  |  |  |  |  |  | x |  |  |  |  |  |  |  |
| 1 | Indiana |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 8 | indiana |  |  |  |  |  |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 7 | Indiana |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 5 | Indiana |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 2 | Jefferson |  |  |  |  |  |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 1 | Jefferson |  | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 | Clearfield |  |  |  |  |  |  | x |  |  |  |  | x | Missing date |  |  |  |
| 13 | Clearfield |  |  |  |  |  |  | x |  |  |  |  | X | Missing date |  |  |  |
| 11 | Clearfield |  |  |  |  |  |  | x |  |  |  |  | X | Missing date |  |  |  |
| 10 | Clearfield |  |  |  |  |  |  | X |  |  |  |  | x | Missing date |  |  |  |
| 9 | Clearfield |  |  |  |  |  |  | x |  |  |  |  | x | Missing date |  |  |  |
| 8 | Clearfield |  |  |  |  |  |  | x |  |  |  |  | X | Missing date |  |  |  |
| 16 | Clearfield |  |  |  |  | x |  |  |  |  |  |  |  |  |  |  |  |
| 12 | Clearfield |  |  |  |  | x |  |  |  |  |  |  |  |  |  |  |  |
| 15 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 3 | Clearfield |  | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 | Clearfield |  | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 | Clearfield |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |


| B | C | D | E | F | G | H | 1 | J | K | L | M | N | O | P | Q | R | S |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 10 | Clearfield |  |  |  |  | X |  |  |  |  |  |  |  |  |  |  |  |
| 4 | Clearfield |  |  |  |  | x |  |  |  |  |  |  |  |  |  |  |  |
| 30 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 29 | Clearfield |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 28 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 27 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 26 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 25 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 24 | Clearfield |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 23 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 22 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 21 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 20 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 19 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 18 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 17 | Clearfield |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 16 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 15 | Clearfield |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 14 | Clearfield |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 7 | Clearfield |  |  |  |  |  |  | x |  |  |  |  |  |  |  |  |  |
| 8 | Clearfield | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 | Clearfield |  | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 | Clearfield | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 20 | Elk |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 18 | Elk |  |  |  |  |  |  |  |  |  |  |  | x | Not registered Republican |  |  |  |
| 5 | Elk |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 13 | Elk |  |  |  |  |  |  | X |  |  |  |  |  |  |  |  |  |
| 19 | Elk | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 17 | Elk |  |  |  |  |  |  |  |  | X |  |  |  |  |  |  |  |
| 16 | Elk |  |  |  |  |  |  |  |  | x |  |  |  |  |  |  |  |
| 15 | Elk | x |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 | Elk | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 | Clearfield |  |  |  |  |  |  |  |  |  |  |  | X | Not registered Republican |  |  |  |
| 4 | Clearfield |  | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 | Armstrong |  |  |  |  | X |  |  |  |  |  |  |  |  |  |  |  |
| 14 | Armstrong |  |  |  |  | X |  |  |  |  |  |  |  |  |  |  |  |
| 13 | Armstrong |  |  |  |  | X |  |  |  |  |  |  |  |  |  |  |  |



## ELECTION SPREADSHEET DIRECTIONS

By order of the Commonwealth Court of Pennsylvania, all Petitions to Set Aside Nomination Petitions or Papers (objection petitions) must be filed either in paper format (original and one copy) or by PACFile (the Pennsylvania appellate court electronic filing system). When individual elector signatures are challenged, the objection petition must be accompanied by a spreadsheet as specified in the Court's order and the directions below.

1. The objection petition shall specify the objections to individual signature lines in nomination petitions or papers and these shall be set forth in this spreadsheet .
2. Spreadsheet columns shall include, for each challenged signature line: page number, line number, county, and the reason or reasons for each objection. The spreadsheet shall designate the grounds for objection using the following abbreviations:

| NR $=$ | Not Registered |
| :--- | :--- |
| NRA $=$ | Not Registered At Address |
| NRD $=$ | Not Registered in District |
| NRDS $=$ | Not Registered on Date Signed |
| OC $=$ | Out of County |
| III $=$ | Illegible |
| LIO $=$ | Line Information Omitted |
| DUP $=$ | Duplicate |
| IHA $=$ | Line Information in Hand of Another |
| N/I $=$ | Nickname/Initial |
| PRI $=$ | Printed Signature |
| Other $=$ | Any ground for objection not listed above (specify the |
|  | exact nature of the objection in the "Describe Other" cell) |

Note: This list of abbreviations for the various grounds to object to a signature is also referred to as the "challenge codes key."
3. The objection petition shall clearly state the number of signature lines challenged as well as the total number of completed signature lines on the face of the nomination petitions or papers.
4. Any other objections, e.g. to circulator affidavits, candidate affidavits, etc., must be clearly and separately stated in the objection petition.
5. If filing the objection petition in paper format:
a. Objector shall attach to the objection petition as an exhibit a printed copy of the spreadsheet printed on $81 / 2 \times 14$ inch paper, with all grid lines showing and column headings appearing on each printed sheet, and a printed copy of the challenge codes key.
b. In addition, Objector shall file two separate digital media devices (CD or USB flash drive), each containing an electronic version of the spreadsheet and the challenge codes key. The electronic version of the spreadsheets on the each digital media
devices must be enabled for editing by the Court, and may not be read-only or password protected.
6. If filing the objection petition by PACFile:
a. Along with the electronically filed objection petition, Objector shall file as an exhibit an electronic (PDF) version of the spreadsheet with all grid lines showing and column headings appearing on each sheet, and an electronic (PDF) version of the challenge codes key.
b. Within two days of submission of filing the objection petition and spreadsheet, Objector shall submit to the Court two paper copies of the electronically filed objection petition and spreadsheet and two separate digital media devices (CD or USB flash drive), each containing an electronic version of the spreadsheet and the challenge codes key. The electronic version of the spreadsheet on the each digital media device must be enabled for editing by the Court, and may not be read-only or password protected.
7. Regardless of the method of filing, in addition to the usual service requirements Objector shall serve upon Candidate one digital media device containing a read-only electronic version of the spreadsheet and challenge codes key.

Revised 2-14-2020

