

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6 day of November, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN PRINT Angela C. Rogers	RESIDENCE 5565 Norman Ave CITY/TOWN Va Beach Va	5/26/18	-
2.	SIGN PRINT WILLIAM ROGERS	RESIDENCE 5565 NORMAN AVE CITY/TOWN VA BEACH	5/26/18	-
3.	SIGN PRINT Candolyn Washburn	RESIDENCE 6175 Edward St. CITY/TOWN NORFOLK, Va	5/26/18	-
4.	SIGN PRINT JAMES LAWSON	RESIDENCE 6175 Edward St CITY/TOWN NORFOLK Va. 23513	5/26	-
5.	SIGN PRINT LARRY OVERTON	RESIDENCE 1220 NEAL CT. CITY/TOWN VA. BCL., VA.	5/26/18	-
6.	SIGN Heather McDonald PRINT Heather McDonald	RESIDENCE 1919 Eastborne Dr. CITY/TOWN VA Bch VA	5/26/18	-

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

* **Privacy notice:** The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

0001A

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

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7.	SIGN <i>Toni Hinshaw</i>	RESIDENCE 1672 Gallery Ave	5/26/18	
	PRINT Toni Hinshaw	CITY/TOWN Va Beach VA		
8.	SIGN <i>Hollye Alexander</i>	RESIDENCE 3028 Glastonbury Cir	5/26/18	
	PRINT Hollye Alexander	CITY/TOWN VB, VA 23153		
9.	SIGN <i>Jessie</i>	RESIDENCE 3025 Glastonbury Cir	5/24/18	
	PRINT Jessie Alexander	CITY/TOWN VB, VA 23453		
10.	SIGN <i>Gayle Ann Pocalyko</i>	RESIDENCE 4436 Seanne St	05/26/18	
	PRINT Gayle Ann Pocalyko	CITY/TOWN VA Beach, VA 23462		
11.	SIGN <i>Travis Dutton</i>	RESIDENCE 7020 BARKLEAF DR.	26 MAY 18	
	PRINT TRAVIS DUTTON	CITY/TOWN VA BEACH, VA 23462		
12.	SIGN <i>Travis Dutton</i>	RESIDENCE 5225 RICH RD	MAY 21, 18	
	PRINT Travis Dutton	CITY/TOWN Va Beach VA 23464		

Commonwealth of Virginia

- AFFIDAVIT -

I, Vernon Britt, swear or affirm that (i) my full residential address is 32444 Sugarcocker Dr Va Beach in the State/Commonwealth of VA-23452; in the County/City/Town of _____; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

TC2659105

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

VA Beach
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE

NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

SIGNATURE OF PERSON CIRCULATING THE PETITION

Vernon Britt

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 2018, by

Vernon Britt

PRINT NAME OF PERSON CIRCULATING THE PETITION

[Signature]
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/18
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

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It included in seal/stamp.

Shaun D. Brown #01 5/27/18

COMMONWEALTH OF VIRGINIA
**PETITION OF QUALIFIED
 VOTERS**

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]
 852 Levy Loop 3683 Windmill Drive
 ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE
 Virginia Beach, VA 23453
 ENTER ABOVE, CITY/TOWN
 ENTER ABOVE, ZIP + 4
 House of Representatives 2ND
 ENTER ABOVE, OFFICE SOUGHT
 ENTER ABOVE, DISTRICT, IF APPLICABLE

Must be filed with Declaration of Candidacy)
 When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.
 For a statewide office
 It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of _____ signed hereunder or on the reverse side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]
 General Election Special Election Democratic Primary Republican Primary
 to be held on the 6th day of November, 2018, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN Thomas Maly PRINT Thomas Maly	RESIDENCE 1614 barfield Dr CITY/TOWN Norfolk 23503	3-8-18	
2.	SIGN William Land PRINT William Land	RESIDENCE 436. P... CITY/TOWN VA. Beach VA.	3/27/18	
3.	SIGN Brianna Tyson PRINT BRIANNA TYSON	RESIDENCE 1536 Ocean Garden Dr CITY/TOWN Virginia Bch, VA 23454	5/27/18	
4.	SIGN Pamela Bennett PRINT Pamela Bennett	RESIDENCE 775 Huybert Place CITY/TOWN Virginia Beach VA 23462	3/29/18	
5.	SIGN Keshun Rudeva PRINT Keshun Rudeva	RESIDENCE 1905 Longdell CITY/TOWN NORFOLK, VA	5/27/18	
6.	SIGN Sarah Baskerville PRINT Sarah Baskerville	RESIDENCE 504 Aylesbury Dr CITY/TOWN Va Beach Va 23462	5/27/18	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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7.	SIGN <i>Sheva Jones</i> PRINT Sheva Jones	RESIDENCE 3148 Bunkers Chase CITY/TOWN VA BEACH, VA	5/27/2018	
8.	SIGN <i>Carolina Cox</i> PRINT Carolina Cox	RESIDENCE 742 Emerald Lake Dr APT 203 CITY/TOWN Virginia Beach VA	5/27/2018	
9.	SIGN <i>Rickey H. Wilson Jr</i> PRINT Rickey H. Wilson Jr	RESIDENCE 3352 Ashaway Rd CITY/TOWN Virginia Beach, VA	5/27/2018	
10.	SIGN <i>Bloyce Iris Barnard</i> PRINT Bloyce Iris Barnard	RESIDENCE 1536 Ocean Garden St CITY/TOWN Virginia Beach, Va	5/27/2018	
11.	SIGN <i>Gloria Britt</i> PRINT Gloria Britt	RESIDENCE 3244 Sugar Creek Dr CITY/TOWN Virginia Beach VA 23452	5/27/18	
12.	SIGN PRINT	RESIDENCE CITY/TOWN		

Commonwealth of Virginia

- AFFIDAVIT -

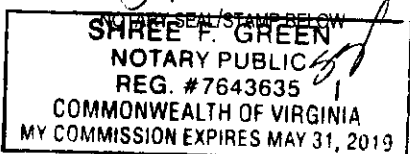
I, Vernon Britt, swear or affirm that (i) my full residential address is 3244 Sugar Creek Dr. VA. Beach VA. in the State/Commonwealth of Beach VA.; in the County/City/Town of 23452; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

162659105

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
VA - Beach
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW



Vernon Britt
 SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 2018, by

Vernon Britt
 PRINT NAME OF PERSON CIRCULATING THE PETITION

[Signature] SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS
7643635 NOTARY REGISTRATION NUMBER**
5/31/19 DATE NOTARY COMMISSION EXPIRES**

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** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

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For a statewide office

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We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach, Norfolk, VA signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of November, 2018, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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1.	 ANTHONY DAY BULLARD	RESIDENCE 1685 Spence Gate Circle CITY/TOWN Virginia Beach, VA	05/27/2018	
2.	 BRITTANY HAYS	RESIDENCE 2017 Monument CITY/TOWN Va. Beach Drive	5/27/18	
3.	 TERRENCE JENKINS	RESIDENCE 700 WINDY RD CITY/TOWN Va. Beach	5/27/2018	
4.	 BIANCA MCLANÉS	RESIDENCE 600 W WILKINSON CITY/TOWN NORFOLK VA	5/27/2018	
5.	 ARIS NAZAROVA	RESIDENCE 1005 Tivoli Cres CITY/TOWN VA BEACH, VA	5/27/2018	
6.	 ARCU MAAT	RESIDENCE 104 Allegany Rd CITY/TOWN Hampton	5/27/2018	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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SBE-506/521 REV 1.2013

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Table with 4 columns: OFFICE USE ONLY, SIGNATURE OF REGISTERED VOTER, POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS, DATE SIGNED, and LAST 4 DIGITS OF SOCIAL SECURITY NUMBER. Rows 7-12 contain handwritten signatures and addresses.

Commonwealth of Virginia

- AFFIDAVIT -

I, Shaun P. Brown, swear or affirm that (i) my full residential address is 3883 Windmill Drive in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side.

T60 380 579

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

Virginia
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

SIGNATURE OF PERSON CIRCULATING THE PETITION

Shaun D Brown

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 20 18, by

Shaun D Brown
PRINT NAME OF PERSON CIRCULATING THE PETITION

Handwritten signature of Shree F. Green

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

Handwritten date 5/31/18

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** If not included in seal/stamp.

SHAUN D. BROWN

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VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

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HOUSE OF REPRESENTATIVES 2ND

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General Election Special Election Democratic Primary Republican Primary

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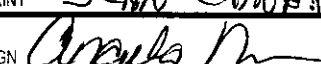
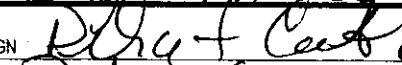

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <i>[Signature]</i> PRINT Andrew R Jackson	RESIDENCE 1013 Downshire Chase CITY/TOWN Virginia Beach	5-7-18	
2.	SIGN <i>[Signature]</i> PRINT Matthew Morales	RESIDENCE 669 Forest Glen Ct CITY/TOWN Virginia Beach, VA 23453	25/5/18	
3.	SIGN <i>[Signature]</i> PRINT Richard A. Woodman	RESIDENCE 913 Shannon Court #202 CITY/TOWN Virginia Beach	5/5/18	
4.	SIGN <i>[Signature]</i> PRINT Michael Faison	RESIDENCE 5361 Leicester Ct. CITY/TOWN Virginia Beach Va.	5/5/18	
5.	SIGN <i>[Signature]</i> PRINT <i>[Signature]</i>	RESIDENCE 5624 CAMPUS DR CITY/TOWN VIRGINIA BEACH	5-5-18	
6.	SIGN <i>[Signature]</i> PRINT Ardicia Cuffee	RESIDENCE 903 Jay Ave Ct. CITY/TOWN Virginia Beach Va.	5/25	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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7.	SIGN  PRINT <u>Joe A Smith</u>	RESIDENCE <u>5607 Campus Ave</u> CITY/TOWN <u>Va Beach Va</u>	<u>5/24/18</u>	
8.	SIGN  PRINT <u>Chris Rernan</u>	RESIDENCE <u>2512 Dellwood Dr</u> CITY/TOWN <u>Va Beach, VA 23461</u>	<u>5-26-18</u>	
9.	SIGN  PRINT <u>SEAN Cambridge</u>	RESIDENCE <u>1352 CROFT NECK RD</u> CITY/TOWN <u>VA VA 23454</u>	<u>5-26-18</u>	
10.	SIGN  PRINT <u>Angela Massell</u>	RESIDENCE <u>757 Gourmet Way</u> CITY/TOWN <u>Va Beach 23462</u>	<u>5-26-18</u>	
11.	SIGN  PRINT <u>Debra Cathey</u>	RESIDENCE <u>1334 Victoriana</u> CITY/TOWN <u>Va Bch 23454</u>	<u>5-28-18</u>	
12.	SIGN  PRINT <u>LEAH DANANGHIRANG</u>	RESIDENCE <u>940 Darby Rd</u> CITY/TOWN <u>VA Beach, 23464</u>	<u>5-26-18</u>	


Commonwealth of Virginia - AFFIDAVIT.
 I, Stephanie Sterner, swear or affirm that (i) my full residential address is 913 Shaman Cris Apt # 202 in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

763145605
 CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
Virginia
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE
 CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW
 SIGNATURE OF PERSON CIRCULATING THE PETITION 

SHREE F. GREEN
 NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

State of Virginia County/City of Hampton
 The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 20 18, by Stephanie Sterner
 PRINT NAME OF PERSON CIRCULATING THE PETITION


 SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS
7643635 5/31/19
 NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

* **Privacy notice:** The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

** If not included in seal/stamp.

Shaun D. Brown

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 Windmill Drive

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

Virginia Beach, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

House of Representatives 2nd

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

COMMONWEALTH OF VIRGINIA
PETITION OF QUALIFIED
VOTERS

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

- General Election
Special Election
Democratic Primary
Republican Primary

to be held on the 6th day of Nov, 2018, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

Table with 5 columns: OFFICE USE ONLY, SIGNATURE OF REGISTERED VOTER, POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS, DATE SIGNED, and *SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER. Contains 6 rows of voter signatures and addresses.

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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0005

SBE-506/521 REV 1.2013

CONTINUED FROM REVERSE SIDE

CANDIDATE NAME: Shaun D. Brown OFFICE SOUGHT: House of Representatives

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER <small>[PRINT NAME IN SPACE BELOW SIGNATURE]</small>	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS <small>House Number and Street Name or Rural Route and Box Number and City/Town</small>	DATE SIGNED <small>[Must be after January 1 of election year]</small>	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER <small>[OPTIONAL]</small>
7	SIGN <u>Angele Basnight</u> PRINT Angele Basnight	RESIDENCE <u>3244 Paolo Court</u> CITY/TOWN <u>Virginia Beach VA</u>	<u>5-26-18</u> <u>23453</u>	
8	SIGN <u>Sam Brownell</u> PRINT <u>[Signature]</u>	RESIDENCE <u>6141 HEATHGLEN CIR</u> CITY/TOWN <u>VIRGINIA BEACH</u>	<u>23456</u>	
9	SIGN <u>[Signature]</u> PRINT <u>Misty [Signature]</u>	RESIDENCE <u>5628 Mon's Neck</u> CITY/TOWN <u>Virginia Beach VA 23461</u>	<u>23457</u>	
10	SIGN <u>J. D. Brown</u> PRINT <u>[Signature]</u>	RESIDENCE <u>5411 Miles RD</u> CITY/TOWN <u>VB, VA 23458</u>		
11	SIGN <u>Michael J. Poczalyko</u> PRINT Michael J. Poczalyko	RESIDENCE <u>4436 Seaside St</u> CITY/TOWN <u>Virginia Beach</u>	<u>5/24/18</u>	
12	SIGN <u>[Signature]</u> PRINT <u>[Signature]</u>	RESIDENCE <u>[Signature]</u> CITY/TOWN <u>Virginia Beach, VA 23459</u>	<u>5/26/18</u> <u>VA 23459</u>	

Commonwealth of Virginia

- AFFIDAVIT -

I, Stephanie Stern or affirm that (i) my full residential address is 415 Shamrock Ave in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

7631-45
CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
Virginia
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE
[Redacted]
CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

[Signature]
SIGNATURE OF PERSON CIRCULATING THE PETITION

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COL. MICHIGAN STATE UNIV. 2019
[Signature]
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

State of Virginia County/City of Hampton
The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 20 18, by Stephanie Stern
PRINT NAME OF PERSON CIRCULATING THE PETITION
7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.
** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: _____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of November, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼		POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <i>[Signature]</i> PRINT <u>Kristen Wilkerson</u>	RESIDENCE <u>2591 Reagan Ave</u> CITY/TOWN <u>VA beach 23454</u>	<u>5/27/18</u>	
2.	SIGN <i>[Signature]</i> PRINT <u>GARY A. WILKS</u>	RESIDENCE <u>1804 AQUAMARINE DR</u> CITY/TOWN <u>VA BEACH VA 23456</u>	<u>5/27/18</u>	
3.	SIGN <i>[Signature]</i> PRINT <u>Christopher Herrell</u>	RESIDENCE <u>1288 Waterford Drive</u> CITY/TOWN <u>Virginia Beach</u>	<u>5/27/18</u>	
4.	SIGN <i>[Signature]</i> PRINT <u>Akhiera Gilliam</u>	RESIDENCE <u>1228 Waterford</u> CITY/TOWN <u>VA Beach VA</u>	<u>5/27/18</u>	
5.	SIGN <i>[Signature]</i> PRINT <u>Kaitlyn Belen</u>	RESIDENCE <u>3616 Winston Ave.</u> CITY/TOWN <u>VA Beach, VA 23456</u>	<u>5/27/18</u>	
6.	SIGN <i>[Signature]</i> PRINT <u>Frederica Phoenix</u>	RESIDENCE <u>VB</u> CITY/TOWN <u>A193 Shallowford Ave</u>	<u>5/27/18</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

* Privacy notice: The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
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OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
7	SIGN <i>[Signature]</i> PRINT Willie Dixon	RESIDENCE 4499 SANIBEL Cir 108 CITY/TOWN VA Beach VA 23162	5/27/18	[REDACTED]
8	SIGN <i>[Signature]</i> PRINT Karen Cypriensmith	RESIDENCE 4449 Sanibel Cir Apt 108 CITY/TOWN Virginia Beach VA 23462	5/27/2018	[REDACTED]
9	SIGN <i>[Signature]</i> PRINT Cynthia S.T. Free	RESIDENCE 2348 Huddleberry Ln CITY/TOWN Va. Beach, Va. 23456	5/27/18	[REDACTED]
10	SIGN <i>[Signature]</i> PRINT Denny Free	RESIDENCE 2348 Huddleberry Ln CITY/TOWN VA VA	5/27/18	[REDACTED]
11	SIGN <i>[Signature]</i> PRINT JAMES ZAHN	RESIDENCE 3253 Colechester Rd CITY/TOWN VB VA 23456	5/27/2018	[REDACTED]
12	SIGN <i>[Signature]</i> PRINT Vernon Britt	RESIDENCE 3244 Sugarloaf Dr CITY/TOWN Va. Beach VA 23452	5/31/18	[REDACTED]

Commonwealth of Virginia

- AFFIDAVIT -

I, Shaun D Brown, swear or affirm that (i) my full residential address is 3683 Windmill Drive in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

160 380 570

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

Virginia

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

[Signature]
SIGNATURE OF PERSON CIRCULATING THE PETITION

State of VA County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 2018, by Shaun D. Brown

PRINT NAME OF PERSON CIRCULATING THE PETITION

[Signature]
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

[Handwritten] 5/31/18

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 ** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: _____ [optional].

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in Virginia Beach which the above candidate seeks nomination or election and of Virginia Beach COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN signed hereunder or on the reverse

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]


General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of NOV, 2018, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <u>Teresa J Stanley</u> PRINT <u>Teresa J Stanley</u>	RESIDENCE <u>143 Castilion Dr</u> CITY/TOWN <u>Va. Beach VA. 23462</u>	<u>5/3/18</u>	
2.	SIGN PRINT	RESIDENCE CITY/TOWN		
3.	SIGN PRINT	RESIDENCE CITY/TOWN		
4.	SIGN PRINT	RESIDENCE CITY/TOWN		
5.	SIGN PRINT	RESIDENCE CITY/TOWN		
6.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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6007

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
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OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
7.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
8.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
9.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
10.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
11.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
12.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		

Commonwealth of Virginia - AFFIDAVIT.
 I, Stephanie Steiner, swear or affirm that (i) my full residential address is 913 Sherman Cross Road in the State/Commonwealth of Virginia Beach; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

7631-45605
 CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
VA permit
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

[Signature]
 SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 2018, by Stephanie Steiner
 PRINT NAME OF PERSON CIRCULATING THE PETITION

[Signature]
 SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

764365 5/31/19
 NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

THREE F. GREEN
 NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

* **Privacy notice:** The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.
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SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

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For a statewide office

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We, the qualified voters of the district in which the above candidate seeks nomination or election and of Norfolk signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of NOV, 2018 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

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OFFICE USE ONLY		POST OFFICE BOXES ARE NOT ACCEPTABLE	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town		
1.	SIGN <i>[Signature]</i> PRINT Alyssa Muhlendorf	RESIDENCE 9643 24th Bay St CITY/TOWN Norfolk VA 23518	5/1/18	[Redacted]
2.	SIGN <i>[Signature]</i> PRINT LAUREN CAMPBELL	RESIDENCE 9532 27th Bay CITY/TOWN NORFOLK	5/1/18	[Redacted]
3.	SIGN <i>[Signature]</i> PRINT John E. Oliver	RESIDENCE 9555 29th Bay St. CITY/TOWN Norfolk VA 23518	5/1/18	[Redacted]
4.	SIGN <i>[Signature]</i> PRINT [Redacted]	RESIDENCE 9523 20th Bay St CITY/TOWN Norfolk, VA 23518	5/1/18	[Redacted]
5.	SIGN PRINT	RESIDENCE CITY/TOWN		
6.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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0008

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT BELOW THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.
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OFFICE USE ONLY ▼		POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
7.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
8.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
9.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
10.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
11.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
12.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		

- AFFIDAVIT -
 I, Stephanie Steiner, swear or affirm that (i) my full residential address is 913 Shuman Cir. Apt. #202 Virginia Beach; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

T631-45605
 CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
VA- JSA
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE
 [REDACTED]
 CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE

NOTARY SEAL/STAMP BELOW

5/31/18
SHREE F. GREEN
 NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

[Signature]
 SIGNATURE OF PERSON CIRCULATING THE PETITION

State of Virginia County/City of Hampton
 The foregoing instrument was subscribed and sworn before me this 31 day of May, 2018, by Stephanie Steiner
 PRINT NAME OF PERSON CIRCULATING THE PETITION

[Signature] 7643635 5/31/19
 SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

* **Privacy notice:** The Code of Virginia, §§ 24.2-506 and 24.2-521, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.
 ** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Norfolk signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of NOV, 2018 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <i>[Signature]</i> PRINT <u>Ricky D Robinson</u>	RESIDENCE <u>5612 Balance St #23</u> CITY/TOWN <u>Va Beach VA 23442</u>	<u>5/1/18</u>	
2.	SIGN <i>[Signature]</i> PRINT <u>Arthur Broadbent III</u>	RESIDENCE <u>159 W. Seaview Ave</u> CITY/TOWN <u>Norfolk VA 23503</u>	<u>5/1/18</u>	
3.	SIGN <i>[Signature]</i> PRINT <u>AJ Ciccone</u>	RESIDENCE <u>4705 PLEASANT</u> CITY/TOWN <u>NORFOLK</u>	<u>5/1/18</u>	
4.	SIGN <i>[Signature]</i> PRINT <u>Donna Williams</u>	RESIDENCE <u>9522 175th St</u> CITY/TOWN <u>Norfolk VA</u>	<u>5/1/18</u>	
5.	SIGN <i>[Signature]</i> PRINT <u>Dean WARDEN</u>	RESIDENCE <u>5303 Sp4 Glass Dr</u> CITY/TOWN <u>Norfolk 23515</u>	<u>5/1/18</u>	
6.	SIGN <i>[Signature]</i> PRINT <u>Don Down</u>	RESIDENCE <u>Bay Point Dr.</u> CITY/TOWN <u>Norfolk VA 23718</u>	<u>5/1/18</u>	


CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER <small>[PRINT NAME IN SPACE BELOW SIGNATURE]</small>	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS <small>House Number and Street Name or Rural Route and Box Number and City/Town</small>	DATE SIGNED <small>[Must be after January 1 of election year]</small>	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER <small>[OPTIONAL]</small>
7	SIGN <i>Sandra Vanata</i> PRINT Sandra Vanata	RESIDENCE 958 Bay Point Dr CITY/TOWN Norfolk VA 23518	5/1/18	
8	SIGN <i>Cina Obery</i> PRINT Cina Obery	RESIDENCE 9617 8th Bay St CITY/TOWN Norfolk VA	5/1/18	
9	SIGN <i>Ashley Misa</i> PRINT Ashley Misa	RESIDENCE P.O. Box 7355 CITY/TOWN Norfolk VA	5-1-18	
10	SIGN <i>Roy L. Powell</i> PRINT ROY L. POWELL	RESIDENCE 203 Warren St. 1A CITY/TOWN NORFOLK VA 23505	5/1/18	
11	SIGN <i>Jane T. White</i> PRINT JANE T. WHITE	RESIDENCE 5037 PLEASANT AVE CITY/TOWN NORFOLK, VA 23518	5/1/18	
12	SIGN <i>Kathleen Renault</i> PRINT KATHLEEN RENALTY	RESIDENCE 5037 PLEASANT AVE CITY/TOWN NORFOLK VA 23518	5/1/18	

Commonwealth of Virginia - AFFIDAVIT -
 I, Stephanie Sternor, swear or affirm that (i) my full residential address is 1011 Main St. Apt #202 in the State/Commonwealth of Virginia; in the County/City/Town of Norfolk; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

1631-4560
 CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
Virginia Po
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S

 CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW
 SIGNATURE OF PERSON CIRCULATING THE PETITION
Stephanie Sternor

SHREE F. GREEN
 NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

State of Virginia County/City of Hampton
 The foregoing instrument was subscribed and sworn before me this 31 day of May, 20 18, by Stephanie Sternor
 PRINT NAME OF PERSON CIRCULATING THE PETITION

Shree F. Green
 SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS
7643635 5/31/19
 NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

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SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

We, the qualified voters of the district in which the above candidate seeks nomination or election and of NORFOLK signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6 day of NOV, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <u>RICHARD SANAG</u> PRINT <u>Richard Sanag</u>	RESIDENCE <u>9549-21 Bay St</u> CITY/TOWN <u>NORFOLK VA 23518</u>	<u>5-1-18</u>	
2.	SIGN <u>Blaych E Wili</u> PRINT <u>Blaych E Wili</u>	RESIDENCE <u>7906 Wilton Drive</u> CITY/TOWN <u>NORFOLK VA 23518</u>	<u>5/1/18</u>	
3.	SIGN <u>Ann Ashworth</u> PRINT <u>Ann Ashworth</u>	RESIDENCE <u>4536 Pleasant Ave</u> CITY/TOWN <u>Norfolk, VA</u>	<u>5-1-18</u>	
4.	SIGN <u>Juanita C Major</u> PRINT <u>JUANITA C. MAJOR</u>	RESIDENCE <u>9618 12th Bay St</u> CITY/TOWN <u>Norfolk, VA 23518</u>	<u>5-1-18</u>	
5.	SIGN <u>Meresa Singer</u> PRINT <u>Meresa Singer</u>	RESIDENCE <u>9524 29th Bay</u> CITY/TOWN <u>Norfolk</u>	<u>5-1-18</u>	
6.	SIGN <u>Ann D Freeman</u> PRINT <u>ANN D FREEMAN</u>	RESIDENCE <u>2424 Bay Oaks Pl</u> CITY/TOWN <u>Norfolk 23518</u>	<u>5-1-18</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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7	SIGN <i>Maria Turner</i> PRINT MARIA TURNER	RESIDENCE [redacted] GLASS DR CITY/TOWN NORFOLK VA		[redacted]
8	SIGN <i>Sharon K. Harrell</i> PRINT SHARON HARRELL	RESIDENCE 9555 29th Bay St CITY/TOWN Norfolk VA	5/1	
9	SIGN <i>Sonia Eshy-Yank</i> PRINT SONIA ESHY-YANK	RESIDENCE 2619 Pethylake Ave CITY/TOWN Norfolk VA	5/1/18	[redacted]
10	SIGN <i>David C. Demko</i> PRINT DAVID C. DEMKO	RESIDENCE 9542 29th Bay St CITY/TOWN NORFOLK VA	5/1/18	
11	SIGN PRINT	RESIDENCE CITY/TOWN		
12	SIGN PRINT	RESIDENCE CITY/TOWN		

Commonwealth of Virginia - AFFIDAVIT -

I, Stephanie Sterner, swear or affirm that (i) my full residential address is 915 Shuman Cres. Apt B105 in the State/Commonwealth of Virginia Beach in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

5/1/18

T631-45605

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
Virginia
 NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE
 [redacted]
 CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
 NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

SIGNATURE OF PERSON CIRCULATING THE PETITION

Stephanie Sterner

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 2018, by Stephanie Sterner

PRINT NAME OF PERSON CIRCULATING THE PETITION

Shree F. Green

7643635 5/31/19

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

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SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

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We, the qualified voters of the district in which the above candidate seeks nomination or election and of Hampton signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of November, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

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SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY	SIGNATURE OF REGISTERED VOTER (PRINT NAME IN SPACE BELOW SIGNATURE)	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED (Must be after January 1 of election year)	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <i>[Signature]</i> PRINT James H. Sava	RESIDENCE 85 Apollo Dr CITY/TOWN Hpt. VA	5/1/18	
2.	SIGN <i>[Signature]</i> PRINT Jewel White	RESIDENCE 112 S. ... CITY/TOWN Hampton, VA	5/22/18	
3.	SIGN <i>[Signature]</i> PRINT WILLIAM BLACK	RESIDENCE 1948 East Penbrooke #15 CITY/TOWN Hampton, VA 23463	5/22/18	
4.	SIGN <i>[Signature]</i> PRINT Shaye Peters	RESIDENCE P.O. Box 3505 CITY/TOWN Hampton, VA	5/22/18	
5.	SIGN <i>[Signature]</i> PRINT Ann Myers	RESIDENCE 600 21st BUCKROO CITY/TOWN Hampton VA 23663	5/22/18	
6.	SIGN <i>[Signature]</i> PRINT Patricia Mitchell	RESIDENCE 43 Madrid Drive CITY/TOWN Hampton VA 23669	5/24/18	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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7.	SIGN <u>Kathy L. Horsley</u> PRINT <u>Kathy Horsley</u>	RESIDENCE <u>Yeast bay berry</u> CITY/TOWN <u>hampton VA 23669</u>	<u>May 21 2018</u>	
8.	SIGN <u>[Signature]</u> PRINT <u>Eugene knight</u>	RESIDENCE <u>6 Huffman Drive</u> CITY/TOWN <u>Hampton VA</u>	<u>May 21 2018</u>	
9.	SIGN <u>[Signature]</u> PRINT <u>DAVE HALL</u>	RESIDENCE <u>38 BEACH RD</u> CITY/TOWN <u>HAMPTON VA</u>	<u>May 21 2018</u>	
10.	SIGN <u>SHARON CLAYTON</u> PRINT <u>Sharon Clayton</u>	RESIDENCE <u>44 Laurel</u> CITY/TOWN <u>Hampton VA 23669</u>	<u>May 21 2018</u>	
11.	SIGN <u>[Signature]</u> PRINT <u>Paula Everhart</u>	RESIDENCE <u>23 Markham Dr</u> CITY/TOWN <u>Hampton VA 23669</u>	<u>May 21 2018</u>	
12.	SIGN <u>[Signature]</u> PRINT <u>Cathryn Taylor</u>	RESIDENCE <u>41 W Chamber</u> CITY/TOWN <u>Hampton VA 23663</u>	<u>May 21 2018</u>	

Commonwealth of Virginia

- AFFIDAVIT -

I, Octavianus Smith, swear or affirm that (i) my full residential address is 11 Triple Crown Ct #304 in the State/Commonwealth of Virginia; in the County/City/Town of Hampton; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

T6035952

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

Virginia
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 2018, by

PRINT NAME OF PERSON CIRCULATING THE PETITION

Shree F. Green
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

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SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

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COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

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CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE CANDIDATE. YOU MAY SIGN PETITIONS FOR MORE THAN ONE CANDIDATE.

OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <u>Shaun D. Brown</u> PRINT <u>Colvin Kidd</u>	RESIDENCE <u>208 Beach Rd</u> CITY/TOWN <u>Hampton, Va</u>	<u>5/11/18</u>	
2.	SIGN <u>Patrina L. George</u> PRINT <u>Patrina L. George</u>	RESIDENCE <u>264 Gretna Ct</u> CITY/TOWN <u>Hampton, VA</u>	<u>5/11/18</u>	
3.	SIGN <u>Lucienne Maneng</u> PRINT <u>Lucienne Maneng</u>	RESIDENCE <u>409 Stockton St</u> CITY/TOWN <u>Hampton VA</u>	<u>5/11/18</u>	
4.	SIGN <u>Rachel King</u> PRINT <u>Rachel King</u>	RESIDENCE <u>615 Bellam Dr</u> CITY/TOWN <u>Hampton VA</u>	<u>5/11/18</u>	
5.	SIGN <u>Michael D. Ricks</u> PRINT <u>MICHAEL D. RICKS</u>	RESIDENCE <u>8 BLUEBERRY HILL</u> CITY/TOWN <u>HPT VA 23669</u>	<u>5/11/18</u>	
6.	SIGN <u>Regina Lord</u> PRINT <u>Regina Lord</u>	RESIDENCE <u>141 Pine Creek Drive</u> CITY/TOWN <u>Hampton VA 23667</u>	<u>5/11/18</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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0012

SBE-506/521 REV 1.2013

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7.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
8.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
9.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
10.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
11.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
12.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		

Commonwealth of Virginia

- AFFIDAVIT -

I, Shaun D. Brown, swear or affirm that (i) my full residential address is 3603 Windmill Drive in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

76038057

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

Virginia
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 2018, by

Shaun D. Brown

PRINT NAME OF PERSON CIRCULATING THE PETITION

Shree F. Green

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635

NOTARY REGISTRATION NUMBER**

5/31/19

DATE NOTARY COMMISSION EXPIRES**

5/31/18
Shree

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** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Hampton signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of November, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON THE REVERSE SIDE OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

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OFFICE USE ONLY ▼	SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENCE ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED [Must be after January 1 of election year]	*SEE NOTE BELOW LAST 4 DIGITS OF SOCIAL SECURITY NUMBER [OPTIONAL]
1.	SIGN <u>Jane Rhoads</u> PRINT <u>JANE RHODES</u>	RESIDENCE <u>417 Ft Worth</u> CITY/TOWN <u>Hampton</u>	<u>5/1/2018</u>	
2.	SIGN <u>Holly Dyden</u> PRINT <u>Holly Dyden</u>	RESIDENCE <u>424 Beaumont St</u> CITY/TOWN <u>Hampton</u>	<u>5/1/18</u>	
3.	SIGN <u>Vivian Thomas</u> PRINT <u>VIVIAN THOMAS</u>	RESIDENCE <u>1050 WINDJAMMER</u> CITY/TOWN <u>HAMPTON</u>	<u>5/1/18</u>	
4.	SIGN <u>Vivian Thomas</u> PRINT <u>Vivian Thomas</u>	RESIDENCE <u>21 Neff Drive</u> CITY/TOWN <u>Hampton, VA</u>	<u>5/1/18</u>	
5.	SIGN <u>Charles S. Thomas Jr</u> PRINT <u>CHARLES S. THOMAS, JR</u>	RESIDENCE <u>21 NEFF DRIVE</u> CITY/TOWN <u>HAMPTON, VA</u>	<u>5/1/18</u>	
6.	SIGN <u>Patricia A. Perkins-Smith</u> PRINT <u>PATRICIA A PERKINS SMITH</u>	RESIDENCE <u>7 Riding Path</u> CITY/TOWN <u>Hampton, VA</u>	<u>5/1/18</u>	

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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7.	SIGN PRINT Shadybreen Henson	RESIDENCE 84 Harris Creek Rd CITY/TOWN Hampton, VA	5/1/18	
8.	SIGN PRINT Kevin Henson	RESIDENCE 84 Harris Creek Rd CITY/TOWN Hampton Va 23069	5/1/18	
9.	SIGN PRINT	RESIDENCE CITY/TOWN		
10.	SIGN PRINT	RESIDENCE CITY/TOWN		
11.	SIGN PRINT	RESIDENCE CITY/TOWN		
12.	SIGN PRINT	RESIDENCE CITY/TOWN		

Commonwealth of Virginia

- AFFIDAVIT -

I, Shaun D. Brown, swear or affirm that (i) my full residential address is 3683 Windmill Drive in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

160 38057

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE
Virginia
NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

SIGNATURE OF PERSON CIRCULATING THE PETITION

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

State of Virginia County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of May, 20 18, by

Shaun D. Brown
PRINT NAME OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

5/18/18
5/31/18

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** If not included in seal/stamp.

SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

[Must be filed with Declaration of Candidacy]

When an election district includes more than one county or city, it is suggested that you use a separate petition form for qualified voters in each county or city to facilitate the processing of the filing.

For a statewide office

It is suggested that you file petitions in county/city to facilitate the processing of the filing. If you track the number of signatures by congressional district enter district no.: ____ [optional].

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Hampton signed hereunder or on the reverse

COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

to be held on the 6th day of November, 20 18, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her/himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

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1.	SIGN <i>Gwendolyn S. Patterson</i> PRINT Gwendolyn S. Patterson	RESIDENCE 308 Admiral Ct CITY/TOWN Hampton, VA	May 1 2018	[REDACTED]
2.	SIGN <i>Wanda L Smith</i> PRINT Wanda L Smith	RESIDENCE 4 Abba Way CITY/TOWN Hampton	5/1/18	[REDACTED]
3.	SIGN <i>Robert S. Harold</i> PRINT Robert S. Harold	RESIDENCE 2 Sugarberry Run CITY/TOWN Hampton VA	5/1/18	[REDACTED]
4.	SIGN <i>Willie D Hare</i> PRINT Willie D Hare	RESIDENCE 516 Almond Ct CITY/TOWN Hampton VA 23069	5/1/18	[REDACTED]
5.	SIGN <i>Cheryl Hollis</i> PRINT Cheryl Hollis	RESIDENCE 923 Allendale Dr CITY/TOWN Hampton, VA 23069	5/1/18	[REDACTED]
6.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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0014

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7.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
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	PRINT	CITY/TOWN		
11.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		
12.	SIGN	RESIDENCE		
	PRINT	CITY/TOWN		

Commonwealth of Virginia - AFFIDAVIT -

I, Shaun D. Brown, swear or affirm that (i) my full residential address is 3683 Windmill Drive in the State/Commonwealth of Virginia; in the County/City/Town of Virginia Beach; (ii) I am a legal resident of the United States of America; (iii) I am not a minor; (iv) I am not a felon whose voting rights have not been restored; and (v) I witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to \$2,500 and/or imprisonment up to ten years.

T60 380 57

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

VA

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW
SHREE F. GREEN
NOTARY PUBLIC
REG. #7643635
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAY 31, 2019

Shaun D. Brown
SIGNATURE OF PERSON CIRCULATING THE PETITION

State of VA County/City of Hampton

The foregoing instrument was subscribed and sworn before me this 31 day of MAY, 20 18, by Shaun D. Brown

PRINT NAME OF PERSON CIRCULATING THE PETITION

Shree F Green
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS

7643635 5/31/19
NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

5/31/18

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SHAUN D. BROWN

COMMONWEALTH OF VIRGINIA PETITION OF QUALIFIED VOTERS

[Must be filed with Declaration of Candidacy]

ENTER ABOVE, NAME OF CANDIDATE [SHOULD BE AS IT IS TO APPEAR ON BALLOT]

3683 WINDMILL DRIVE

ENTER ABOVE, RESIDENCE ADDRESS OF CANDIDATE

VIRGINIA BEACH, VA 23453

ENTER ABOVE, CITY/TOWN

ENTER ABOVE, ZIP + 4

HOUSE OF REPRESENTATIVES 2ND

ENTER ABOVE, OFFICE SOUGHT

ENTER ABOVE, DISTRICT, IF APPLICABLE

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COUNTY OR CITY OR, FOR TOWN COUNCIL, NAME OF TOWN

side of this page, do hereby petition the above named individual to become a candidate for the office stated above in the [check only one]

General Election Special Election Democratic Primary Republican Primary

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1.	SIGN PRINT Niande Garland	RESIDENCE 105 E. Shenwad Ave CITY/TOWN Hampton	6/5/18	
2.	SIGN PRINT HELEN TILLEY	RESIDENCE 917 ALLENDALE DR CITY/TOWN HAMPTON, VA	5/1/18	
3.	SIGN PRINT Penny Collins	RESIDENCE 6 Admiral Ct CITY/TOWN Hampton VA	5/1/18	
4.	SIGN PRINT Steven C. Newman	RESIDENCE 2 Edinburgh Lane CITY/TOWN Hampton, VA 23669	5/1/2018	
5.	SIGN PRINT	RESIDENCE CITY/TOWN		
6.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON REVERSE SIDE

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Commonwealth of Virginia

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TL60380579

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE,

Virginia

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

SIGNATURE OF PERSON CIRCULATING THE PETITION

Shaun D. Brown

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NOTARY PUBLIC
 REG. #7643635
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES MAY 31, 2019

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7643635 5/31/19

NOTARY REGISTRATION NUMBER** DATE NOTARY COMMISSION EXPIRES**

3/31/18

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