

Signatures must be procured within the legal time period for securing same.
 This Petition must be filed in the office of the Erie County Board of Elections on or before the last day prescribed by law.
 Each signer may sign petitions for as many candidates for each office as he or she can vote for, and no more.

Commonwealth of Pennsylvania
Nomination Petition

To have Name of Candidate printed upon the
 Official Ballot for the Primary Election

2025 MAR 11 AM 8:44
 ERIE COUNTY
 VOTER REGISTRATION
 Date/Time Received

We, the undersigned, all of whom are qualified electors of Erie County and **1 Millcreek Township**
 (Electoral district in which the nomination or election is to be made)
 and are registered and enrolled members of the **2 Democratic** Party or Policy, hereby petition the County Board
 of Elections of Erie County to have the name of **3 Kylie Morris**
 (Type, print, or write plainly the name as you wish it to appear on the official ballot)
 whose Profession, Business or Occupation is **4 Physician** and whose
 address where registered and enrolled is **5 6070 Meridian Dr Erie, PA 16509**
 (Residential address with street, number [where possible], and zip code)
 printed upon the Official Ballot of the aforesaid Party in said District, for the Primary Election for the year 2025 as a
 candidate for the Office of **6 Millcreek Township Supervisor** **7 6 years**
 (Title of office) (Term of office)

SIGNERS ARE CAUTIONED TO AVOID THE USE OF DITTO MARKS

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	Municipality (City, Borough, or Township)	
	ROBERT J. MARTIN	4133	STONE CREEK DR	ERIE	3/7/25
	Colleen Kerr	3124	MOTONYSIDE	MILLCREEK	3/7/25
	RAY GAUDIESKI	1214	SILVER DR	MILLCREEK	3/7/25
	LISA GRAFF	1214	SILVER DR	MILLCREEK	3/7/25
	Charles Wakel	5302	WOLF RD	MILLCREEK	3/7/25
	Victoria Delany	4729	PERKINS ST	MILLCREEK	3/7/25
	LINDA TROTOSKE	2530	N TRAX DR	MILLCREEK	3/8/25
	Perry N. Wood	3138	W. 53rd ST.	MILLCREEK	3/8/25
	Rebecca Kessler	3620	AMHERST	MILLCREEK	3/8/25
	Christopher DeSantis	6070	Meridian	MILLCREEK	3/8/25
	Judith Falvey	3319	AMHERST RD	MILLCREEK	3/8-25
	KENNETH W. SMITH	4561	SOUTHERN DR	MILLCREEK	3/8/25
	CATHERINE E. O'NEIL	4633	LAKE PLEASANT RD	MILLCREEK	3/8/25
	Kylie Morris	6070	Meridian Dr	MILLCREEK	3/8/25
	Alice E. Niebauer	1526	High St	MILLCREEK	3-8-25
	CHRISTOPHER HACKLEY	2825	LOVELAND AVE	MILLCREEK	3-8-25
	STEPHEN STANBRO	3716	MEADOW DR	MILLCREEK	3.8.25

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	Municipality (City, Borough, or Township)	
<i>Colleen Conneely</i>	Colleen Conneely	2825	Loveland	MILLCREEK	3/8/25
<i>Mary Fischer</i>	Mary Fischer	836	Beaumont Ave	MILLCREEK	3/8/25
<i>DAVID NICKER</i>	DAVID NICKER	3311	W 40th	MILLCREEK	3/8/25
<i>MARY NELSON</i>	MARY NELSON	3326	ARIVE DR	MILLCREEK	3/8/25
<i>John Spruyt</i>	JOHN SPRUYT	293	HOMER	MILLCREEK	3-8-25
<i>Michael Kihl</i>	Michael Kihl	1733	GARLOCK DR	MILLCREEK	3-10-25
<i>Adam Klus</i>	Adam Klus	3508	COURT AVE.	MILLCREEK	3-10-25
26.					
27.					
28.					
29.					
30.					
31.					
32.					
33.					
34.					
35.					

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 nomination 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. (Underlined portion not applicable to a circulator for the office of Magisterial District Judge).

Further, I state that 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. Erie
County of Petition Signers
2. Kylie Morris
Printed Name of Circulator
3. Kylie Morris 3-11-25
Signature of Circulator Date Signed
4. 6070 Meridian Dr
Number and Street Address of Circulator
5. Erie Millcreek 16509
City, Borough, or Township ZIP

The Statement of Circulator must be executed after all signatures have been obtained.

Signatures must be procured within the legal time period for securing same.
 This Petition must be filed in the office of the Erie County Board of Elections on or before the last day prescribed by law.
 Each signer may sign petitions for as many candidates for each office as he or she can vote for, and no more.

Commonwealth of Pennsylvania
Nomination Petition
 To have Name of Candidate printed upon the
 Official Ballot for the Primary Election

2025 MAR 11 AM 8:44

ERIE COUNTY
 VOTER REGISTRATION

Date/Time Received

We, the undersigned, all of whom are qualified electors of Erie County and 1 Millcreek Township
(Electoral district in which the nomination or election is to be made)
 and are registered and enrolled members of the 2 Democratic Party or Policy, hereby petition the County Board
 of Elections of Erie County to have the name of 3 Kylie Morris
(Type, print, or write plainly the name as you wish it to appear on the official ballot)
 whose Profession, Business or Occupation is 4 Physician and whose
 address where registered and enrolled is 5 6070 Meridian Dr Erie, PA 16509
(Residential address with street, number (where possible), and zip code)
 printed upon the Official Ballot of the aforesaid Party in said District, for the Primary Election for the year 2025 as a
 candidate for the Office of 6 Millcreek Township Supervisor 7 6 years
(Title of office) (Term of office)

SIGNERS ARE CAUTIONED TO AVOID THE USE OF DITTO MARKS

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	Municipality (City, Borough, or Township)	
1. <i>Susan Tibbits</i>	Susan Tibbits	5620	Larchmont Dr.	Millcreek	3/10/25
2. <i>Sharon Sitter</i>	Sharon Sitter	4804	S. Wayside Dr.	Millcreek	3/10/25
3. <i>Tim Welsh</i>	TIM WELSH	2584	CORVETTE DR	MILLCREEK	3/10/25
4. <i>Mary Anne Welsh</i>	MARY ANNE WELSH	2584	CORVETTE DR	MILLCREEK	3/10/25
5. <i>Deborah James</i>	Deborah James	5364	Woodward Dr	Millcreek	3/10/25
6. <i>Lora Caldwell</i>	LORA CALDWELL	2320	Loveland	Millcreek	3/10/25
7. <i>Kristy Gribar</i>	Kristy Gribar	2463	W 6 th St	Millcreek	3/10/25
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					

SIGNATURE OF ELECTOR	PRINTED NAME OF ELECTOR	ADDRESS WHERE REGISTERED AND ENROLLED			DATE OF SIGNING
		House No.	Street or Road	Municipality (City, Borough, or Township)	
18.					
19.					
20.					
21.					
22.					
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30.					
31.					
32.					
33.					
34.					
35.					

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 nomination 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. (Underlined portion not applicable to a circulator for the office of Magisterial District Judge).

Further, I state that 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. Erie
County of Petition Signers
2. Kylie Morris
Printed Name of Circulator
3. Kylie Morris 3-11-25
Signature of Circulator Date Signed
4. 6070 Meridian Dr
Number and Street Address of Circulator
5. Erie Millersville 16509
City, Borough, or Township ZIP

The Statement of Circulator must be executed after all signatures have been obtained.

CANDIDATE'S AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF ERIE

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 pre-election and post-election reporting of campaign contributions and expenditures; that unless I 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.

I swear (or affirm) to the above parts as required by the laws applicable to the office I seek.

Sworn to and subscribed before me

this 11th day of Mar., 20 25

Tonia Fernandez
4-3-27

My Commission Expires

Commonwealth of Pennsylvania - Notary Seal
Tonia Fernandez, Notary Public
Erie County
My commission expires April 3, 2027
Commission number 1288912

Member, Pennsylvania Association of Notaries

Kylie Morris
(Signature of Candidate)

Kylie Morris
(Printed Name of Candidate)

6070 Meridian Dr. 116509
(Street Address, including Post Office & Zip Code)

Erie, PA Millcreek Township
(City, Borough, or Township)

WAIVER OF EXPENSE ACCOUNT REPORTING AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF ERIE

Before me, the undersigned authority in and for said State and County, personally appeared the undersigned, who, being duly sworn according to law, did depose and say that as a candidate, he or she does not intend to form a political committee or to receive contributions or make expenditures in excess of Two Hundred Fifty Dollars (\$250) during any reporting period, that, as a candidate, he or she will keep records of contributions and expenditures as required by law; that, as a candidate, he or she will file reports as required by law if contributions or expenditures exceed Two Hundred Fifty Dollars (\$250). (Act No. 1960-127)

Sworn to and subscribed before me

this _____ day of _____, 20 _____

My Commission Expires _____

(Signature of Candidate)

(Printed Name of Candidate)

(Street Address, including Post Office & Zip Code)

(City, Borough, or Township)

THE UNIVERSITY OF CHICAGO
LIBRARY
540 EAST 57TH STREET
CHICAGO, ILL. 60637
TEL: 773-936-3000
WWW.CHICAGO.EDU