

# Virginia Petition of Qualified Voters

(Must be filed with the SBE-505/520 Declaration of Candidacy) IA

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F Sutton</u> Full Residence Address (including city/state/zip): <u>4856 Admiration Drive Virginia Beach</u> Office Sought: <u>School BOARD</u> District: <u>3 Va. 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> signed hereunder or on the reverse side of this page, do hereby petition the above County/City/Town named individual to become a candidate for the office stated above in the (check only one) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Donald Patrick Purbee</u> <u>Donald P. Purbee</u> Print Full Name      Signature <u>4776 Marlborough Dr, Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/2024	[REDACTED]
R	2.	<u>Phyllis KEEFLE</u> <u>Phyllis Keefe</u> Print Full Name      Signature <u>4777 Marlborough Dr VA Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/2024	
R	3.	<u>Robert S. Cannon</u> <u>Robert S Cannon</u> Print Full Name      Signature <u>4781 Marlborough Dr. VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	4.	<u>Kathy Roark Cannon</u> <u>Kathy Roark Cannon</u> Print Full Name      Signature <u>4781 Marlborough Dr. Va. Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	5.	<u>Scott Hallauer</u> <u>Scott Hallauer</u> Print Full Name      Signature <u>680 Churchill Dr VB VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/4/24	
R	6.	<u>Jennifer Hallauer</u> <u>Jennifer Hallauer</u> Print Full Name      Signature <u>680 Churchill Dr VB VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/4/24	

# Virginia Petition of Qualified Voters (continued from reverse side)

1B

Candidate Ballot Name: John F SUTTON Office Sought: SCHOOL BOARD

**Note to Petitioner 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petitioner Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<p><u>Jerome Hoffer</u> Print Full Name</p> <p><u>[Signature]</u> Signature</p> <p><u>673 Churchill DR VA Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/4/24	
R	8.	<p><u>Susan Hoffer</u> Print Full Name</p> <p><u>[Signature]</u> Signature</p> <p><u>673 Churchill DR VA Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/4/24	
R	9.	<p><u>Rodney C Parker</u> Print Full Name</p> <p><u>[Signature]</u> Signature</p> <p><u>677 Churchill Dr VA Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/4/24	
R	10.	<p><u>Kelly Bondurant</u> Print Full Name</p> <p><u>[Signature]</u> Signature</p> <p><u>4929 Rosecroft St. Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/4/24	
R	11.	<p><u>SAMUEL L. BANDURANT</u> Print Full Name</p> <p><u>[Signature]</u> Signature</p> <p><u>4929 ROSECREFT ST. VIRGINIA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	02/4/24	
R	12.	<p><u>Samantha L. Bondurant</u> Print Full Name</p> <p><u>Samantha L Bondurant</u> Signature</p> <p><u>4929 ROSECREFT ST. Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/4/24	

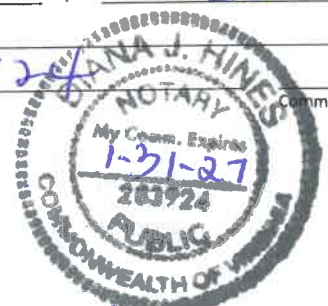
**Circulator Affidavit**

I, John F Sutton, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration dr. VA Beach VA 23464 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/3/24

**Notary**


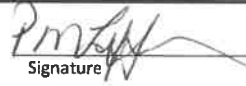


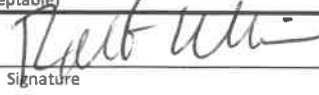
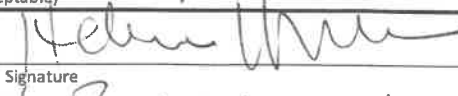
State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 2024  
 by (circulator name) John Sutton  
 Notary Signature: [Signature] Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters

2A  
FEB 26 2024 10:55  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John R SUTTON</u> Full Residence Address (including city/state/zip): <u>4854 Admiration drive Virginia Beach</u> Office Sought: <u>SCHOOL BOARD</u> District: <u>3 VA 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary To be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Nathan Forchard</u> <small>Print Full Name</small> <u>677 Brookway Ct. VA Beach, VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	
R	2.	<u>Patricice Leflaw</u> <small>Print Full Name</small> <u>4928 Brod ke way Dr 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	
R	3.	<u>Stevv Leflaw</u> <small>Print Full Name</small> <u>4928 Brookeway Drive VA Beach 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	
R	4.	<u>Robin J Wilcison</u> <small>Print Full Name</small> <u>4909 Brookeway Dr VA Beach VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	
R	5.	<u>Robert Whitaker</u> <small>Print Full Name</small> <u>4913 Brookew ay Dr. Va Beach, VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	
R	6.	<u>Helene Whitaker</u> <small>Print Full Name</small> <u>4913 Brookew ay Dr. Va Beach, VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	 <small>Signature</small> <u>2/5/24</u>	

# Virginia Petition of Qualified Voters (continued from reverse side)

2B

Candidate Ballot Name: John F SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
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Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<u>MICHAEL J. DOUGHERTY</u> <u>Michael J. Dougherty</u> Print Full Name Signature <u>676 BROOKWAY CT, VIRGINIA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>5 Jan 2024</u>	
R	8.	<u>Alina R. Dougherty</u> <u>[Signature]</u> Print Full Name Signature <u>676 Brookeway Ct. VA Virginia 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>Feb 5 2024</u>	
R	9.	<u>SKELBY PRONKREE</u> <u>[Signature]</u> Print Full Name Signature <u>680 BROOKWAY CT. VB VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>020524</u>	
R	10.	<u>Marsha L. Olson</u> <u>Marsha L. Olson</u> Print Full Name Signature <u>673 Brookway Ct. Virginia Beach Va 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>2/5/24</u>	
R	11.	<u>HANNAH E DOUGHERTY</u> <u>Hannah Dougherty</u> Print Full Name Signature <u>676 BROOKWAY CT. VIRGINIA BEACH VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>2/5/24</u>	
R	12.	<u>Sandra Forehand</u> <u>[Signature]</u> Print Full Name Signature <u>677 Brookway Ct. VB, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>2/5/24</u>	

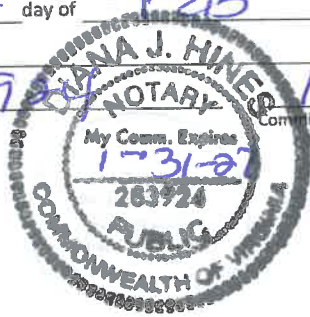
**Circulator Affidavit**

I, (print full name) John F Sutton, swear or affirm that (i) my full residential address (including city/state/zip) is 4956 Admiraton dr Virginia Beach VA 23464. (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/5/2024

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 20 24  
 by (circulator name) John Sutton  
 Notary Signature [Signature] Registration # 283924 My Comm. Expires 1-31-27 Commission Expiration

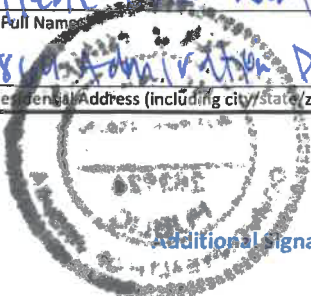


# Virginia Petition of Qualified Voters

3A  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Virginia Beach</u> Office Sought: <u>School board</u> District: <u>3 Va. 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>NOVEMBER</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Joe Camarda</u> Print Full Name      Signature <u>4868 Admiration Dr. V.B. VA. 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb 3 2024	
R	2.	<u>Marylou Camarda</u> Print Full Name      Signature <u>4868 Admiration Dr. VB. VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb. 3 2024	
R	3.	<u>Whitney Dear-Reyes</u> Print Full Name      Signature <u>4864 Admiration Drive Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb. 3 2024	
R	4.	<u>Jonathan Reyes</u> Print Full Name      Signature <u>4864 Admiration Dr. VA. Beach, VA. 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb 3 2024	
R	5.	<u>Megan Cheatham</u> Print Full Name      Signature <u>4869 Admiration Dr. VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb 3 2024	
R	6.	<u>Allene Cheatham</u> Print Full Name      Signature <u>4869 Admiration Dr. VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	Feb 3 2024	



# Virginia Petition of Qualified Voters (continued from reverse side)

3B

Candidate Ballot Name: John F SUTTON Office Sought: School Board

**Note to Petition Signer**

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- You may sign petitions for more than one candidate.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
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Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
RNQ	7.	<p>Heather Brinkerhoff <i>[Signature]</i>                      Print Full Name Signature                      4860 Admiration Dr, Virginia Beach VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/23/24	
RNQ	8.	<p>RYAN BRINKECHOFF <i>[Signature]</i>                      Print Full Name Signature                      4860 ADMIRATION DR, VA BEACH, VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/23/24	
R	9.	<p>Mildred Greeves <i>[Signature]</i>                      Print Full Name Signature                      4865 Admiration Dr VA Beach 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	10.	<p>Mary Sweeney <i>[Signature]</i>                      Print Full Name Signature                      4861 Admiration Dr, Va Beach                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	11.	<p>MARK PRICE <i>[Signature]</i>                      Print Full Name Signature                      924 CHADWICK CT VA BEACH. 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	12.	<p>Allison Price <i>[Signature]</i>                      Print Full Name Signature                      924 Chadwick Ct Virginia Beach, 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	

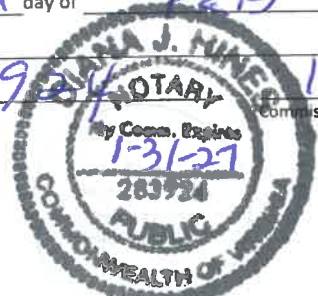
**Circulator Affidavit**

I, (print full name) John F SUTTON, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration dr, Va Beach VA. (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: *[Signature]* Date: 2/3/2024

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 20 24  
 by (circulator name) John Sutton  
 Notary Signature: *[Signature]* Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters

4A  
 (Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiraton Drive Va Beach VA</u> Office Sought: <u>School BOARD</u> District: <u>3</u> <span style="float: right;"><u>23464</u></span> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Marylynn Slough</u> <u>Marylynn Slough</u> Print Full Name Signature <u>4852 Ashmeade Ct VB 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/2/24	
RWA	2.	<u>Jon R. Crunkleton</u> <u>Jon R. Crunkleton</u> Print Full Name Signature <u>953 Amesbury Rd Va Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/23/24	
R	3.	<u>Rebecca T. Wilkinson</u> <u>Rebecca T. Wilkinson</u> Print Full Name Signature <u>928 Chadwick Ct. Va Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/2/24	
R	4.	<u>Philip A. Wilkinson</u> <u>Philip A. Wilkinson</u> Print Full Name Signature <u>928 Chadwick Ct. VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2-2-24	
R	5.	<u>JEFFREY W. SMAR</u> <u>Jeffrey W. Smar</u> Print Full Name Signature <u>964 EDWIN DRIVE VA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/2/24	
R	6.	<u>Janice D. Pagano</u> <u>Janice D. Pagano</u> Print Full Name Signature <u>977 Edwin Dr. Va Beach Va. 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/2/24	



# Virginia Petition of Qualified Voters (continued from reverse side)

4B

Candidate Ballot Name: John F Sutton Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
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Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

**Circulator Affidavit**

I, (print full name) John F Sutton, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration drive Va Beach Va (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/3/2024

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 2024  
 by (circulator name) John Sutton  
 Notary Signature: [Signature] Registration # 28392 Commission Expiration 1-31-27



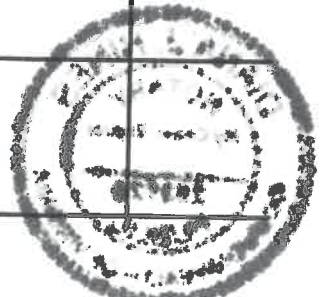


# Virginia Petition of Qualified Voters

5A FEB 26 2024 3:55  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F Sutton</u> Full Residence Address (including city/state/zip): <u>MBS6 Admiration Dr Va Beach Va 23464</u> Office Sought: <u>VB School BOARD</u> District: <u>3</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side must be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Laurence Hitchings</u> <u>Laurence Hitchings</u> Print Full Name      Signature <u>908 Post Oak Ct Va Beach 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/7/2024	
R	2.	<u>Jandra Brandt-Rentel</u> <u>Jandra Brandt-Rentel</u> Print Full Name      Signature <u>904 Post Oak Ct Va Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/7/2024	
R	3.	<u>Rose A Valentine</u> <u>Rose A Valentine</u> Print Full Name      Signature <u>900 Post Oak Ct Va Beach Va 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/7/24	
NR	4.	<u>Scott Pridgen</u> <u>Scott Pridgen</u> Print Full Name      Signature <u>4849 Admiration Drive 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2-7-24	
	5.	_____ Print Full Name      Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable)		
	6.	_____ Print Full Name      Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable)		



# Virginia Petition of Qualified Voters (continued from reverse side)

5B

Candidate Ballot Name: John F Sutton Office Sought: VB School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

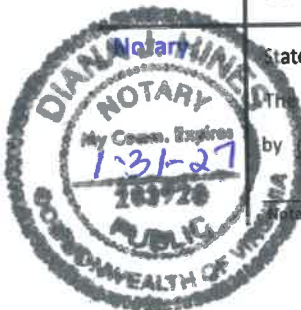
Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

**Circulator Affidavit**

I, (print full name) John F Sutton, swear or affirm that (i) my full residential address (including city/state/zip) is MBSG Admiration drive VA Beach VA 23464 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: \_\_\_\_\_

Date: 2/7/24



State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of FEB, 20 24  
 by (circulator name) John Sutton  
 Notary Signature: [Signature] Registration # 283924 Commission Expiration 1-31-27

Place of notary purchase, Reproducible Stamp/Seal Here

Place of notary purchase, Reproducible Seal/Stamp Here

# Virginia Petition of Qualified Voters

(Must be filed with the SBE-505/520 Declaration of Candidacy) 6A FEB 23 4:51:54

**Candidate Information**

Candidate Ballot Name: JOHN F SUTTON

Full Residence Address (including city/state/zip): 4856 Admiration drive Va Beach

Office Sought: School BOARD District: 3 VA. 23464

Congressional District (optional): \_\_\_\_\_

- Note to Circulator**
- Review Instructions on page 3.
  - The Circulator Affidavit on the reverse side **must** be completed and signed in front of a Notary.

**Petition Signer Statement**

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach County/City/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)

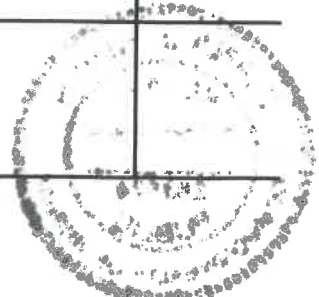
General Election     Special Election     Democratic Primary     Republican Primary

to be held on the 5 day of November, 20 24.

and we do further petition that his/her name be printed upon the official ballots to be used at the election.

- Note to Petition 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.
  - Privacy notice:**
    - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
    - The information provided will be checked against the official voter registration roll.
    - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
  - Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	1.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	2.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	3.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	4.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	5.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	6.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		



# Virginia Petition of Qualified Voters (continued from reverse side)

Candidate Ballot Name: John R SUTTON Office Sought: School BOARD 6B

**Note to Petition Signer**

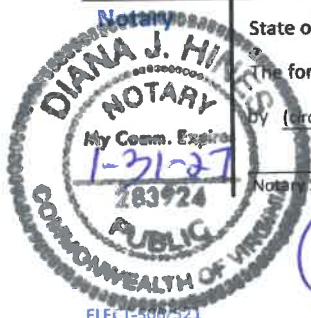
- Your signature on this petition must be your own and does not signify an intent to vote for the candidate.
- You may sign petitions for more than one candidate.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	SANDY ABREU <small>Print Full Name</small> Signature: <i>Sandy Abreu</i> 4920 BROOKWAY DR. VA BEACH 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/5/24	
	8.	<small>Print Full Name</small> _____ <small>Signature</small> _____ <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small> _____		
	9.	<small>Print Full Name</small> _____ <small>Signature</small> _____ <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small> _____		
	10.	<small>Print Full Name</small> _____ <small>Signature</small> _____ <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small> _____		
	11.	<small>Print Full Name</small> _____ <small>Signature</small> _____ <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small> _____		
	12.	<small>Print Full Name</small> _____ <small>Signature</small> _____ <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small> _____		

**Circulator Affidavit**

I, John F Sutton, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration Drive Va Beach VA 23464  
 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: *[Signature]* Date: 2/5/2024



State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of FEB, 20 24  
 by (circulator name) John Sutton  
 Notary Signature: *[Signature]* Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters (continued from reverse side)

7B

Candidate Ballot Name: John R SUTTON Office Sought: School Board

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<p><u>Shawonda Kinan</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>972 Edgewood Drive 23464</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	8.	<p><u>Ken Laber</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>965 Larkway Ct 23464</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	9.	<p><u>Julia Wilson</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>984 Larkway Ct - 23464</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	10.	<p><u>KEVIN M. AVILES</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>988 LARKWAY CT. 23464</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	11.	<p><u>Elisha Aviles</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>988 Larkway Ct 23464</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/2024	
CI	12.	<p><u>MARK SWEENEY</u> <u>[Signature]</u></p> <p>Print Full Name Signature</p> <p><u>4861 ADMIRATION DR VIRGINIA BEACH VA</u></p> <p>Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	

**Circulator Affidavit**

I, John R SUTTON, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration drive Va Beach Va 23464

(ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/3/2024

**Notary**

State of Virginia County/City of Virginia Beach

The foregoing instrument was subscribed and sworn before me this 19th day of FEB, 20 24

by (circulator name) John Sutton

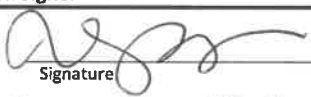
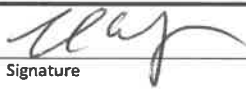
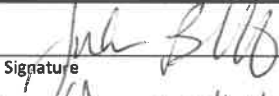
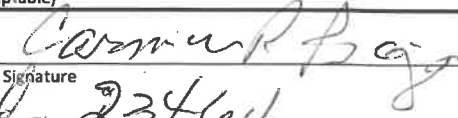
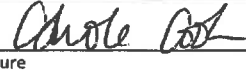
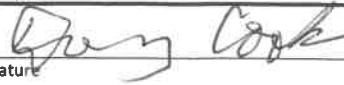
Notary Signature: [Signature] Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters

8A  
 (Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Va Beach Va</u> Office Sought: <u>SCHOOL BOARD</u> District: <u>3</u> <span style="float: right;"><u>23464</u></span> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>NOVEMBER</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Megan Taylor</u> Print Full Name <u>4772 Marlborough Dr. Va Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 2/3/24	
R	2.	<u>Thomas Taylor</u> Print Full Name <u>4772 MARLBOROUGH DR VA BEACH VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 05/26/24	
R	3.	<u>Julie Brindley</u> Print Full Name <u>930 Darby Rd Va Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 2.3.24	
R	4.	<u>CARMEN BOJIO Carmen Bojio</u> Print Full Name <u>933 DARB Y RD 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 2/3/24	
R	5.	<u>Carole Cook</u> Print Full Name <u>924 Darby Rd. VA Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 2/3/24	
R	6.	<u>Dora Cook</u> Print Full Name <u>924 Darby Rd. Va. Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	 Signature 2/3/24	

# Virginia Petition of Qualified Voters (continued from reverse side)

8B

Candidate Ballot Name: John F SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<p>Michel R. Twine <i>Michel R Twine</i>                      Print Full Name Signature                      Full Residential Address (including city/state/zip) (PO Box not acceptable) <u>917 Darby Rd. Virginia Beach VA 23464</u></p>	2-3-24	
	8.	<p><del>Don Alexander</del> <i>917 Darby Rd</i>                      Print Full Name Signature VA Beach VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		
R	9.	<p>Kathryn Rekkedal <i>Kathryn Rekkedal</i>                      Print Full Name Signature                      Full Residential Address (including city/state/zip) (PO Box not acceptable) <u>4790 Darby Ct. Virginia Beach, VA 23464</u></p>	2/3/2024	
R	10.	<p><del>Peter Courte</del> <i>4782 Darby Ct. VA Beach VA 23462</i>                      Print Full Name Signature                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	11.	<p>TERRANCE WINTER <i>Terrance Winter</i>                      Print Full Name Signature                      Full Residential Address (including city/state/zip) (PO Box not acceptable) <u>4783 Darby Ct. VA Beach 23464</u></p>	2/5/24	
R	12.	<p>Linda L. Durkee <i>Linda L Durkee</i>                      Print Full Name Signature                      Full Residential Address (including city/state/zip) (PO Box not acceptable) <u>4776 Marlborough Dr Va Beach VA 23464</u></p>	2/3/2024	

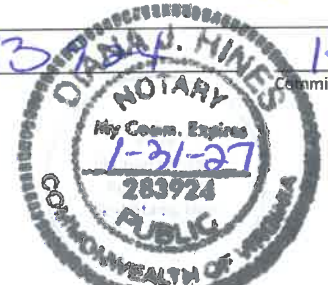
**Circulator Affidavit**

I, (print full name) John F SUTTON, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration drive Va Beach VA 23464 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: *John F Sutton* Date: 2/3/24

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 20 24  
 by (circulator name) John Sutton  
 Notary Signature: *Diana Hines* Registration # 283 Commission Expiration 1-31-27



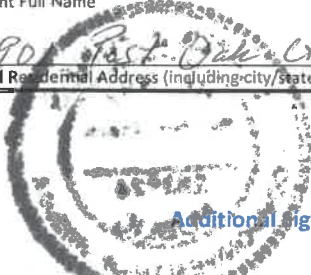


# Virginia Petition of Qualified Voters

9A  
 (Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Virginia Beach</u> Office Sought: <u>School BOARD</u> District: <u>3 Va 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side must be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	Deborah Hill <u>Deborah Hill</u> <small>Print Full Name</small> <small>Signature</small> <u>901 Amesbury Rd. Va. Beach, VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	2.	Adrian Jones <u>Adrian Jones</u> <small>Print Full Name</small> <small>Signature</small> <u>906 AMESBURY ROAD VA BEACH VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	3.	Salvatore DABIERO <u>Salvatore DABIERO</u> <small>Print Full Name</small> <small>Signature</small> <u>4730 Post Oak Dr Va Beach Va 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	4.	Maurice DABIERO <u>Maurice DABIERO</u> <small>Print Full Name</small> <small>Signature</small> <u>4730 Post Oak Dr Va Beach Va 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	5.	NORMAN D. BARCLAY <u>Norman D. Barclay</u> <small>Print Full Name</small> <small>Signature</small> <u>901 POST OAK CT VA BEACH, VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	6.	Judith A Barclay <u>Judith A Barclay</u> <small>Print Full Name</small> <small>Signature</small> <u>901 Post Oak Ct Va Beach VA 23464</u> <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2-4-24	



# Virginia Petition of Qualified Voters (continued from reverse side)

9B

Candidate Ballot Name: John F Sutton Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

**Circulator Affidavit**

I, (print full name) John F Sutton swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration drive Va Beach Va 23464 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: \_\_\_\_\_ Date: 2/4/2023

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 2024  
 by (circulator name) John Sutton  
 Notary Signature: Diana J. Mines Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters

10A  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John R Sutton</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Virginia Beach</u> Office Sought: <u>School BOARD</u> District: <u>3 Va. 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side must be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	David Kay Mansfield <small>Print Full Name</small> Signature 4916 Rosecroft St Virginia Beach VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	[REDACTED]
R	2.	Timothy A. Reibel <small>Print Full Name</small> Signature 4940 Rosecroft Street, VB, 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2-4-24	
R	3.	Deborah Reibel <small>Print Full Name</small> Signature 4940 Rosecroft St VB, Va 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	4.	Marcella Guillen <small>Print Full Name</small> Signature 904 Amesbury Rd, VB, VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	5.	Kevin M. Guillen <small>Print Full Name</small> Signature 904 Amesbury Rd VB VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	
R	6.	John W. Hill <small>Print Full Name</small> Signature 901 Amesbury Rd VB VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/4/24	

Virginia Petition of Qualified Voters (continued from reverse side)

Candidate Ballot Name: John R SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

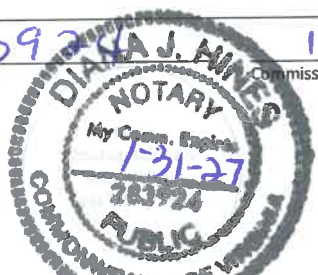
**Circulator Affidavit**

I, (print full name) John R SUTTON, swear or affirm that (i) my full residential address (including city/state/zip) is 4856 Admiration drive VA Beach VA 23464 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: \_\_\_\_\_ Date: 2/3/24

**Notary**

State of Virginia County/City of Virginia Beach  
 The foregoing instrument was subscribed and sworn before me this 19th day of Feb, 2024  
 by (circulator name) John Sutton  
 Notary Signature: \_\_\_\_\_ Registration # 283924 Commission Expiration 1-31-27



# Virginia Petition of Qualified Voters

11A  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John R SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Virginia Beach</u> Office Sought: <u>School BOARD</u> District: <u>3 VA. 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Tena Cannon</u> <u>Tena Cannon</u> Print Full Name    Signature <u>820 Moffat Lane Virginia Beach 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	.
R	2.	<u>LISA DEMARTINO</u> <u>Lisa Demartino</u> Print Full Name    Signature <u>825 MOFFAT LANE VIRGINIA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	3.	<u>Hannah Staab</u> <u>Hannah Staab</u> Print Full Name    Signature <u>821 Boxwood Rd, Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	4.	<u>Kelly Graves</u> <u>Kelly Graves</u> Print Full Name    Signature <u>805 EDWIN DR. VA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	5.	<u>Scott Denham</u> <u>Scott Denham</u> Print Full Name    Signature <u>4747 Roscroft St VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	6.	<u>Taryn Denham</u> <u>Taryn Denham</u> Print Full Name    Signature <u>4747 Roscroft St, 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	

# Virginia Petition of Qualified Voters (continued from reverse side)

11B

Candidate Ballot Name: John F SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	<p><u>Kellie Riggs</u> Print Full Name</p> <p><u>3013 HERMANN CT, 23453</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	<p><u>Kellie Riggs</u> Signature</p>	<p><u>213/24</u></p>
	8.	<p>_____ Print Full Name</p> <p>_____ Signature</p> <p>_____ Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		
	9.	<p>_____ Print Full Name</p> <p>_____ Signature</p> <p>_____ Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		
	10.	<p>_____ Print Full Name</p> <p>_____ Signature</p> <p>_____ Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		
	11.	<p>_____ Print Full Name</p> <p>_____ Signature</p> <p>_____ Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		
	12.	<p>_____ Print Full Name</p> <p>_____ Signature</p> <p>_____ Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>		

**Circulator Affidavit**

I, (print full name) Colin Fogarty, swear or affirm that (i) my full residential address (including city/state/zip) is 2304 Coln Court Ct. Virginia Beach Ct 2345, (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/3/2024

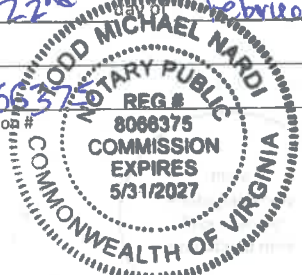
**Notary**

State of Virginia County/City of Charlottesville

The foregoing instrument was subscribed and sworn before me this 22nd day of February, 2024

by (circulator name) Colin Fogarty

Notary Signature: [Signature] Registration # 8066375 Commission Expires 5/31/2027



# Virginia Petition of Qualified Voters

(Must be filed with the SBE-505/520 Declaration of Candidacy)

12A

**Candidate Information**  
 Candidate Ballot Name: John F SUTTON  
 Full Residence Address (including city/state/zip): 4856 Admiration drive Va Beach Va  
 Office Sought: School BOARD District: 3 23464  
 Congressional District (optional): \_\_\_\_\_

**Note to Circulator**

- Review Instructions on page 3.
- The Circulator Affidavit on the reverse side **must** be completed and signed in front of a Notary.

**Petition Signer Statement**  
 We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach County/City/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 5 day of November, 20 24, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

**Note to Petition 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.
- **Privacy notice:**
  - o Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - o The information provided will be checked against the official voter registration roll.
  - o This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- **Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	Mark R. Benson <small>Print Full Name</small> <i>Mark R. Benson</i> <small>Signature</small> 812 Aqueduct Ct, VA Beach 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/3/2024	
R	2.	George T Ferguson <small>Print Full Name</small> <i>George T Ferguson</i> <small>Signature</small> 808 Aqueduct VA Beach VA <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2-3-24	
R	3.	Vickie Harris <small>Print Full Name</small> <i>Vickie Harris</i> <small>Signature</small> 813 Aqueduct Ct VB Virginia 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2-3-24	
R	4.	Ronald Briscoe <small>Print Full Name</small> <i>Ronald Briscoe</i> <small>Signature</small> 822 Rockingham Ct VA Beach VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/3/24	
R	5.	Jessica Virgili <small>Print Full Name</small> <i>Jessica Virgili</i> <small>Signature</small> 825 Rockingham Ct. VA Beach VA 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/3/24	
R	6.	John W Banker <small>Print Full Name</small> <i>John W Banker</i> <small>Signature</small> 801 Rockingham Ct VA Beach 23464 <small>Full Residential Address (including city/state/zip) (PO Box not acceptable)</small>	2/3/24	

# Virginia Petition of Qualified Voters (continued from reverse side)

12B

Candidate Ballot Name: John F Sutton Office Sought: School Board

**Note to Petitioner 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petitioner Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<p><u>Laura Hermiz</u> <u>Laura Hermiz</u>                      Print Full Name Signature</p> <p><u>4698 Steeplechase Dr. Virginia Beach VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2-3-24	
R	8.	<p><u>Nicholas Davis</u> <u>Nick Davis</u>                      Print Full Name Signature</p> <p><u>821 Hancover Dr Virginia Beach, VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	02/03/24	
R	9.	<p><u>Chris Bunting</u> <u>Chris Bunting</u>                      Print Full Name Signature</p> <p><u>4690 Rosecroft St Va Beach VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	10.	<p><u>Mariquae Manning</u> <u>Mariquae Manning</u>                      Print Full Name Signature</p> <p><u>4683 Rosecroft VA Beach VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	02/9/24	
CI	11.	<p><u>Caroline Kaiser</u> <u>Caroline Kaiser</u>                      Print Full Name Signature</p> <p><u>27 Brighton Ct. VB, VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/2024	
R	12.	<p><u>Branson Meleiros</u> <u>Branson Meleiros</u>                      Print Full Name Signature</p> <p><u>828 Oldham Rd, VB, VA 23464</u>                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/2024	

**Circulator Affidavit**

I, (print full name) Colin R. Fogarty, swear or affirm that (i) my full residential address (including city/state/zip) is 2304 Lake Conrad St. Virginia Beach VA 23454, (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/3/2024

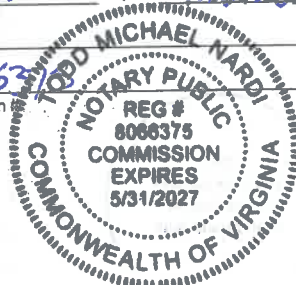
**Notary**

State of Virginia County/City of Charlottesville

The foregoing instrument was subscribed and sworn before me this 22nd day of February, 2024

by (circulator name) Colin Fogarty

Notary Signature: [Signature] Registration # 60663708 Commission Expires 05/31/2027





# Virginia Petition of Qualified Voters

(Must be filed with the SBE-505/520 Declaration of Candidacy)

13A

**Candidate Information**  
 Candidate Ballot Name: John F SUTTON  
 Full Residence Address (including city/state/zip): 4850 Admiration drive Va Beach Va  
 Office Sought: SCHOOL BOARD District: 3 23464  
 Congressional District (optional): \_\_\_\_\_

**Note to Circulator**  
 • Review Instructions on page 3.  
 • The Circulator Affidavit on the reverse side **must** be completed and signed in front of a Notary.

**Petition Signer Statement**  
 We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach County/City/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 5 day of November, 20 24,  
 and we do further petition that his/her name be printed upon the official ballots to be used at the election.

**Note to Petition 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.  
 • **Privacy notice:**  
   o Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.  
   o The information provided will be checked against the official voter registration roll.  
   o This form is available for public inspection but your SSN, or any part thereof, will not be provided.  
 • **Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Dwight M Smith</u> Print Full Name <u>953 Wickham Ct</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	2.	<u>Brian Dirato</u> Print Full Name <u>4825 Michaux Dr</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	3.	<u>EUGENE LEVOW</u> Print Full Name <u>4829 MICHAUX DR</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	4.	<u>CHARLES H WARD</u> Print Full Name <u>953 MICHAUX CT</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>Charles H Ward</u> Signature <u>2/3/24</u>	
R	5.	<u>David Cutchins</u> Print Full Name <u>4841 Michaux Dr.</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	6.	<u>Paul Thrush</u> Print Full Name <u>956 Amesbury Rd</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	

# Virginia Petition of Qualified Voters (continued from reverse side)

13B

Candidate Ballot Name: John R SUTTON Office Sought: SCHOOL BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<p>James Wharton <i>[Signature]</i>                      Print Full Name                      4849 Ashmeade Ct VA Beach VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	[REDACTED]
R	8.	<p>DAVID SPIVEY <i>[Signature]</i>                      Print Full Name                      940 AMESBURY RD VA BEACH VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	9.	<p>MATILDA H. SPIVEY <i>[Signature]</i>                      Print Full Name                      940 Amesbury Rd VA Beach VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	10.	<p>Gina Verdeschi <i>[Signature]</i>                      Print Full Name                      941 timberlake drive Virginia Beach VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	11.	<p>Dyb Mshuda <i>[Signature]</i>                      Print Full Name                      4816 Admiralty Dr VB VA 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	
R	12.	<p>Tracey Sampson <i>[Signature]</i>                      Print Full Name                      945 Hanover Drive VB 23464                      Full Residential Address (including city/state/zip) (PO Box not acceptable)</p>	2/3/24	

**Circulator Affidavit**

I, Bennett Aliabadi, swear or affirm that (i) my full residential address (including city/state/zip) is 9810 sheads ct Burke, VA 22015, (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: *[Signature]* Date: 2/3/24

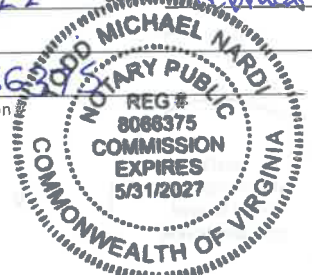
**Notary**

State of Virginia County/City of Charlottesville

The foregoing instrument was subscribed and sworn before me this 22nd day of February, 2024

by (circulator name) Bennett Aliabadi

Notary Signature: *[Signature]* Registration # 80662000 Commission Expires 05/31/2027



# Virginia Petition of Qualified Voters

14A  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

<b>Candidate Information</b>	Candidate Ballot Name: <u>John R SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Va Beach Va</u> Office Sought: <u>School BOARD</u> District: <u>3</u> <u>23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> signed hereunder or on the reverse side of this page, do hereby petition the above County/City/Town named individual to become a candidate for the office stated above in the (check only one) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>November</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	Kenneth Scott Steward Print Full Name: _____ Signature: <u>KS Steward</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>941 Hancock Dr. VB 23464</u>	<u>2/03/24</u>	
R	2.	Catherine Rangel Print Full Name: _____ Signature: <u>CRA</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>4825 Knollwood Ct. VB 23464</u>	<u>2/3/24</u>	
R	3.	Tom Hamilton Print Full Name: _____ Signature: <u>Tom Hamilton</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>945 Harbor Dr VA 23464</u>	<u>2/3/24</u>	
R	4.	Roger Berry Print Full Name: _____ Signature: <u>Roger Berry</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>205 Eastwind Ct. VB, VA 23464</u>	<u>2/3/24</u>	
R	5.	Sandra Haas-Radin Print Full Name: _____ Signature: <u>Sandra Haas-Radin</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>900 Eastwind Ct VB, VA 23464</u>	<u>2/3/24</u>	
R	6.	Judith Schorr Print Full Name: _____ Signature: <u>Judith Schorr</u> Full Residential Address (including city/state/zip) (PO Box not acceptable): <u>4812 Eastwind Pl. Va Beach VA 23464</u>	<u>2/3/24</u>	

# Virginia Petition of Qualified Voters (continued from reverse side)

14B

Candidate Ballot Name: John R SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

**Circulator Affidavit**

I, (print full name) Bennett Aliabadi, swear or affirm that (i) my full residential address (including city/state/zip) is 9810 Sheeds Ct Burke, VA 22015, (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: \_\_\_\_\_ Date: 2/3/24

**Notary**

State of Virginia County/City of Charlottesville  
 The foregoing instrument was subscribed and sworn before me this 22<sup>nd</sup> day of February, 2024  
 by (circulator name) Bennett Aliabadi  
 Notary Signature \_\_\_\_\_ Registration # 8066375 Commission Expires 05/31/2027



# Virginia Petition of Qualified Voters

(Must be filed with the SBE-505/520 Declaration of Candidacy)

ISA FEB 26 AM 9:55

<b>Candidate Information</b>	Candidate Ballot Name: <u>John F SUTTON</u> Full Residence Address (including city/state/zip): <u>4856 Admiration drive Virginia Beach</u> Office Sought: <u>SCHOOL BOARD</u> District: <u>3 VA 23464</u> Congressional District (optional): _____
<b>Note to Circulator</b>	<ul style="list-style-type: none"> <li>Review Instructions on page 3.</li> <li>The Circulator Affidavit on the reverse side <b>must</b> be completed and signed in front of a Notary.</li> </ul>
<b>Petition Signer Statement</b>	We, the qualified voters of the district in which the above candidate seeks nomination or election and of <u>Virginia Beach</u> County/City/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) <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Special Election <input type="checkbox"/> Democratic Primary <input type="checkbox"/> Republican Primary to be held on the <u>5</u> day of <u>NOVEMBER</u> , 20 <u>24</u> , and we do further petition that his/her name be printed upon the official ballots to be used at the election.
<b>Note to Petition Signer</b>	<ul style="list-style-type: none"> <li>Your signature on this petition must be your own and does not signify an intent to vote for the candidate.</li> <li>You may sign petitions for more than one candidate.</li> <li><b>Privacy notice:</b> <ul style="list-style-type: none"> <li>Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.</li> <li>The information provided will be checked against the official voter registration roll.</li> <li>This form is available for public inspection but your SSN, or any part thereof, will not be provided.</li> </ul> </li> <li><b>Fraud notice:</b> Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.</li> </ul>

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	Nicol Roberts Print Full Name Signature 4904 Admiration Dr. VB 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
NR	2.	Thomas Connors Print Full Name Signature 474 Marlborough Dr VA 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	3.	Kenneth Harrington Print Full Name Signature 912 covert ct. 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
R	4.	Jacqueline Simmons Print Full Name Signature 909 Covert Ct, 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
CI	5.	Frank Shearman Print Full Name Signature 4729 MALCOLM DR VA 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	
	6.	John G. G. G. Print Full Name Signature 4616 FOXHILL CT 23464 Full Residential Address (including city/state/zip) (PO Box not acceptable)	2/3/24	

# Virginia Petition of Qualified Voters (continued from reverse side)

158

Candidate Ballot Name: John R SUTTON Office Sought: School BOARD

**Note to Petition 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.
- Privacy notice:**
  - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
  - The information provided will be checked against the official voter registration roll.
  - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
- Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
	7.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	8.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	9.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	10.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	11.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		
	12.	Print Full Name _____ Signature _____ Full Residential Address (including city/state/zip) (PO Box not acceptable) _____		

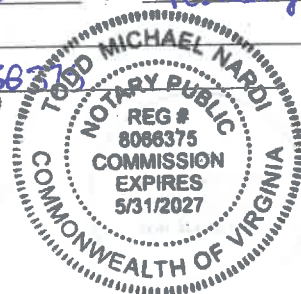
**Circulator Affidavit**

I, (print full name) Tucker Meeks, swear or affirm that (i) my full residential address (including city/state/zip) is 10713 Mystic Point Dr. Fredericksburg, VA 22407, (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: Tucker Meeks Date: 2/03/2024

**Notary**

State of Virginia County/City of Charlottesville  
 The foregoing instrument was subscribed and sworn before me this 22nd day of February, 2024  
 by (circulator name) TUCKER MECKS  
 Notary Signature \_\_\_\_\_ Registration # 8066375 Commission Expiration 05/31/2027



# Virginia Petition of Qualified Voters

16A  
(Must be filed with the SBE-505/520 Declaration of Candidacy)

**Candidate Information**

Candidate Ballot Name: John R SUTTON

Full Residence Address (including city/state/zip): 4856 Admiration drive Virginia Beach

Office Sought: School BOARD District: 3 VA 23464

Congressional District (optional): \_\_\_\_\_

- Note to Circulator**
- Review Instructions on page 3.
  - The Circulator Affidavit on the reverse side must be completed and signed in front of a Notary.

**Petition Signer Statement**

We, the qualified voters of the district in which the above candidate seeks nomination or election and of Virginia Beach County/City/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 5 day of November, 20 24, and we do further petition that his/her name be printed upon the official ballots to be used at the election.

- Note to Petition 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.
  - **Privacy notice:**
    - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
    - The information provided will be checked against the official voter registration roll.
    - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
  - **Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	1.	<u>Vince Taylor</u> Print Full Name <u>4921 Wharaway Ln VA Beach 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>1/3/24</u>	
R	2.	<u>Brighton Thordson</u> Print Full Name <u>981 Kelso Ct, Virginia Beach VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	3.	<u>John H. Myers</u> Print Full Name <u>984 Kelso Ct Virginia Beach Va 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	4.	<u>Linda B. Deviney</u> Print Full Name <u>993 Kelso Ct Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	5.	<u>Jerry F Deviney</u> Print Full Name <u>993 Kelso Ct Virginia Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	
R	6.	<u>Jessira Brown</u> Print Full Name <u>990 Kelso Ct.</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature <u>2/3/24</u>	

# Virginia Petition of Qualified Voters (continued from reverse side)

16B

Candidate Ballot Name: JOHN R SUTTON Office Sought: SCHOOL BOARD

- Note to Petition 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.
  - Privacy notice:**
    - Providing the last four digits of your SSN is optional. You may sign the petition without providing this information.
    - The information provided will be checked against the official voter registration roll.
    - This form is available for public inspection but your SSN, or any part thereof, will not be provided.
  - Fraud notice:** Any willfully false material statement or entry made on this form by any person shall constitute the crime of election fraud and be punishable as a Class 5 felony.

Office Use Only	#	Petition Signer	Date Signed (Must be after January 1st of election year.)	Last 4 Digits of SSN (optional)
R	7.	<u>ROBERT L DAVIDSON</u> Print Full Name <u>974 KELSO CT VIRGINIA BEACH, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/13/24	
R	8.	<u>Babara Anderson</u> Print Full Name <u>965 Kelso Ct. VA Beach, Va</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/1/24	
R	9.	<u>Keith Richensdollar</u> Print Full Name <u>4936 Admiration Dr. VA VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/3/24	
R	10.	<u>Catherine Eversole</u> Print Full Name <u>4921 Admiration Dr. VA Beach 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/3/24	
R	11.	<u>ERIC R Helke</u> Print Full Name <u>4924 Admiration Dr. Va Beach, VA. 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/03/24	
R	12.	<u>Taryn Massey</u> Print Full Name <u>4916 Admiration Dr. VA Beach, VA 23464</u> Full Residential Address (including city/state/zip) (PO Box not acceptable)	<u>[Signature]</u> Signature 2/3/24	

**Circulator Affidavit**

I, (print full name) Tucker Meeks, swear or affirm that (i) my full residential address (including city/state/zip) is 10713 Mystic Point Dr. Fredericksburg, VA 22407 (ii) I am not a minor, (iii) I am not a felon whose voting rights have not been restored; (iv) I have witnessed the signature of each person who signed this page and its reversed side; and (v) I consent to the jurisdiction of the courts of Virginia in resolving any disputes concerning the circulation of petitions, or signatures contained therein. 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.

Circulator Signature: [Signature] Date: 2/03/24

**Notary**

State of Virginia County/City of Charlottesville

The foregoing instrument was subscribed and sworn before me this 22<sup>nd</sup> day of February, 2024

by (circulator name) Tucker Meeks

Notary Signature: [Signature] Registration # 8086375 Commission Expiration 05/31/2027

