INSTRUCTIONS ON REVERSE SIDE

RECALL PETITION

calling of an election to recall		from the office of			
anning of all closuoff to result	of an election to recall from the office of (Name of Officer)		e) (Dist	(District, if Any) for the following reason	
WARNING-A PERSON W	HO KNOWINGI V SIGNS A RECALL DE	TITION MORE THAN ONCE OR SIGNS A I	NAME OTHER THAN HIS OR	LICE OWN IC VIOLATING	
PROVISIONS OF THE MIC	CHIGAN ELECTION LAW.	THON WORE THAN ONCE OR SIGNS AT	NAME OTHER THAN HIS OR		
SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING MONTH DAY YE	
1.				MOUNT DATE TO	
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
0.					
1.					
2.					
CER	TIFICATE OF CIRCULATOR	CIRC	ULATOR – DO NOT SIGN OR	DATE	
	asserts that he or she is a qualified and registered elector of the ignature on the petition was signed in his or her presence and w	electoral district CERTIFICAT	TE UNTIL AFTER CIRCULATIN		
	hat he or she neither caused nor permitted a person to sign the pe g the petition more than once. The undersigned circulator of the		A 10	/ / / (Date)	
r asserts that to his or her best knowledg	e, information and belief each signature is the genuine signatur	e of the person		•	
rting to sign the petition; the person signin	g the petition was at the time of signing a qualified registered ele ; and the elector was qualified to sign the petition.				
NING-A CIRCULATOR KNOW	VINGLY MAKING A FALSE STATEMENT IN T CULATOR WHO SIGNS AS A CIRCULATOR, OR A PE		d)	<u> </u>	
	HER OWN AS CIRCULATOR IS GUILTY OF A MISI		et and Number or Rural Route)	(Zip Code)	

TO BE COMPLETED BY CITY OR TOWNSHIP CLERK

Check the registration of each person whose name appears on the reverse side of this petition sheet **whose name is not coded** in the left-hand column.

the person's name If the person was registered to vote in your City or Township on the date he or she signed the sheet, place a check mark before

If the person was not registered to vote registered) before the person's name. ⊒. your City or Township on the date he or she signed the sheet, enter ΰ̈́R (not

If the address listed by the person does not fall within your City or Township, enter "NC" (not in community) before the person's

Complete the following certificate after making the registration checks:

	☐ City or		as bellig registered in his city of Township of the date of signifigure pention sheet is:	I hereby certify that the total number of persons whose names appear on the reverse side of this petition
(Name of City or Township)		(Signature of City or Township Clerk)	e perition sheet is:(Enter Number)	on the reverse side of this petition sheet who I identified

READ BEFORE CIRCULATING PETITION

The validity 으 signatures placed on this petition may be affected if the following <u>s</u> not observ

Complete the heading of the petition before circulating it.

- Enter the city or township and county where the petition will be circulated. Indicate whether the jurisdiction listed is a "city" or a "township." Do not list more than one city or township.
- Enter the officer's complete name and the office he or she holds. Include the district number of the office if there is one
- Enter the Election reason(s) why the recall election is being sought. The language entered must be exactly as approved by the County Commission.

Make sure that all signers properly complete the petition.

- Each signer must be registered to vote in the city or township listed 크. the heading
- Each signer must sign and print his or her first and last name.¹
- Each signer must enter his or her full address. A rural route number is acceptable. A post office box is not acceptable.
- Each signer must enter his or her Zip Code.2
- Each signer must date his or her signature with the month, day and year

Complete the circulator's certificate after circulating the petition.

- Sign the date on the circulator's certificate are invalid. and print your full name and enter the month, day and year.1 Signatures on the petition which are dated
- Enter the name of the city or township where you are registered. You must be registered to represented by the officeholder whose recall is sought. vote 크. а 양 or township
- Enter your full address. \triangleright rural route number is acceptable. A post office box is not acceptable
- Enter your Zip Code.²

Circulate the petition properly.

- Do not fail to question signers on their city or township of registration.
- Do not complete the heading of the petition after signatures have been affixed on the petition.
- Do not fill in a signer's address or a signer's are not acceptable in these two entries. signature date. **Both entries** must be ⊇. the signer's own handwriting. Ditto marks
- Do not leave the petition unattended
- ¹The failure of the circulator or an elector who signs the petition to print his or her name or to print his or her name in the proper location does <u>not</u> affect the validity of the circulator's or signer's signature. However, a printed name located in the space designated for printed names does <u>not</u> constitute the signature of the circulator or elector.
- The failure of the circulator or an elector who signs the petition to enter a correct Zip Code does <u>not</u> affect the validity of the circulator's or signer's i Zip Code or s s signature. ō enter his 9 her

