

PETITION FOR RECALL

Petitioner	NAME
Official being recalled	NAME
Grounds for recall	 ☐ Misconduct ☐ Failure in the execution of his or her office ☐ Conduct incompatible with the due execution of his or her office ☐ Loss of confidence of the city's residents
Reasons for recall	
Your signature	 I, the undersigned, declare that: I am a qualified elector; I am eligible to submit petitions for recall; I am not convicted of a crime; I am not disqualified from public office by a judge; I am not disqualified from public office by an electoral officer for a violation of electoral rules; and All information contained within this petition is, to the best of my knowledge and belief, true and correct.
	SIGNATURE DATE (YYYY-MM-DD)

Submit completed form to an electoral officer.