

It is unlawful to sign this petition before it has a serial number.
 “ _____ **PAID CIRCULATOR** ” “ _____ **VOLUNTEER** ”

Recall Petition

We, the qualified electors of the electoral district from which _____ was elected, demand his recall.
 The grounds of this demand for recall are as follows: _____ (Name and title of office)

Signature	Name (first and last name printed)	Actual address (street & no. and if no street address, describe residence location)	Arizona post office address & zip code	City or town (if any)	Date signed
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

Instructions for Circulators

- 1. All petitions shall be signed by circulator.
- 2. Paid circulators, whether a resident of Arizona or another state, circulating for a statewide recall shall register with the secretary of state before circulating petitions.
- 3. Circulator is not required to be a resident of this state but otherwise must be qualified to register to vote in this state and, if not a resident of this state, shall register as a circulator with the secretary of state.
- 4. Circulator's actual residence address or, if no street address, a description of residence location shall be included on the petition.

Affidavit of Circulator

State of Arizona)
)
 County of _____) ss.:
)
 (Where notarized)

I, _____, a person who is not required to be a resident of this state but who is otherwise qualified to register to vote in the county of _____ (Print Name), in the state of Arizona at all times during my circulation of this petition sheet, and under the penalty of a class 1 misdemeanor, depose and say that subject to § 19-115, Arizona Revised Statutes, each individual printed the individual's own name and address and signed this sheet of the foregoing petition in my presence on the date indicated, and I believe that each signer's name and residence address or post office address are correctly stated and that each signer is a qualified elector of the state of Arizona (or in the case of a city, town or county measure, of the city, town or county affected by the recall) and that I am qualified to register to vote and all signers of this petition are qualified to vote in the recall election.

(Signature of affiant) _____

(Residence address, street and number of affiant, or if no street address, a description of residence location) _____

(Seal)

Subscribed and sworn to before me on _____ (Date).

 Notary Public

Number _____