

**WARNING:  
IT IS AGAINST THE LAW**

For anyone to sign any initiative or referendum petition with any name other than his or her own or to knowingly sign his or her name more than once for the same measure or to knowingly sign a petition when not a registered elector who is eligible to vote on the measure.

**DO NOT SIGN THIS PETITION UNLESS YOU ARE A  
REGISTERED ELECTOR  
AND ELIGIBLE TO VOTE ON THIS MEASURE.  
TO BE A REGISTERED ELECTOR,  
YOU MUST BE A CITIZEN OF COLORADO  
AND REGISTERED TO VOTE**

Do not sign this petition unless you have read or have had read to you the proposed initiative or referred measure or the summary in its entirety and understand its meaning.

Honorable Mayor and City Council: We the undersigned registered voters of the City of Longmont (*insert the action you want the City Council to take*)

*[Summary of the proposed initiative or ordinance that is the subject of a referendum petition shall be printed following the above warning on each page of the petition section. The summary shall be true and impartial and shall not be an argument, or likely to create prejudice, either for or against the measure. THE SUMMARY SHALL BE PREPARED BY THE CLERK (C.R.S. 31-11-106(3)(b))]*

**[The full text of the proposed initiated measure or ordinance that is the subject of a referendum petition shall be printed following the summary on the first page or pages of the petition section that precede the signature page. If the proposed initiated measure or ordinance requires more than one page of a petition section, the warning and summary need not appear at the top of other than the initial text page. (C.R.S. 31-11-106(3)(c))]**

The following persons shall represent the proponents of the petition in all matters affecting the petition and all notices or information concerning the petition shall be mailed to these individuals:

NAME	ADDRESS
[representative]	[representative's mailing address]
[representative]	[representative's mailing address]

<sup>1</sup> *The Longmont City Clerk's office has prepared this form for citizen information and reference. Citizens should use this as a sample form only. The initiative process is somewhat complicated and may involve unresolved questions of law and statutory interpretation. City staff cannot undertake to serve as legal advisors or representatives for any particular citizens, and cannot guarantee legal sufficiency of this form. We encourage anyone embarking on this process to carefully review the pertinent state statutes and to involve competent legal counsel*

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Registered Elector's Signature	Printed Name	Place of Residence (Street Address)	City	County	Date Signed
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Registered Elector's Signature	Printed Name	Place of Residence (Street Address)	City	County	Date Signed
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CIRCULATOR'S AFFIDAVIT

I, \_\_\_\_\_, RESIDING AT: \_\_\_\_\_  
Printed Name Street name and number

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, AFFIRM THE FOLLOWING:  
Municipality County State Zip Code

THAT I HAVE READ AND UNDERSTAND THE LAWS GOVERNING THE CIRCULATION OF PETITIONS; THAT AT THE TIME THIS SECTION OF THE PETITION WAS CIRCULATED AND SIGNED BY THE LISTED ELECTORS, I WAS EIGHTEEN YEARS OLD OR OLDER; THAT I PERSONALLY CIRCULATED THIS SECTION OF THE PETITION; THAT EACH SIGNATURE WAS AFFIXED IN MY PRESENCE; THAT EACH SIGNATURE IS THE GENUINE SIGNATURE OF THE PERSON WHOSE NAME IT PURPORTS TO BE; THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, EACH OF THE PERSONS SIGNING THE PETITION SECTION WAS, AT THE TIME OF SIGNING, A REGISTERED ELECTOR IN THE CITY OF LONGMONT, COLORADO; AND THAT I HAVE NOT PAID AND WILL NOT IN THE FUTURE PAY AND THAT I BELIEVE THAT NO OTHER PERSON HAS PAID OR WILL PAY, DIRECTLY OR INDIRECTLY, ANY MONEY OR OTHER THING OF VALUE TO ANY SIGNER FOR THE PURPOSE OF INDUCING OR CAUSING SUCH SIGNER TO AFFIX THE SIGNER'S SIGNATURE TO THE PETITION.

\_\_\_\_\_  
Signature of Circulator

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

State of Colorado }  
County of Boulder }

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_

SEAL