City of Commerce City, Colorado
OFFICE OF THE CITY CLERK
7887 E. 60th Ave.
Commerce City, CO 80022
Phone 303-289-3676 **Fax** 303-227-8798
www.c3gov.com

STATE OF COLORADO	)		
	)		
COUNTY OF ADAMS	)	**SS.**	**CERTIFICATE**
	)		
CITY OF COMMERCE CITY	)		

I, Laura J. Bauer, City Clerk of Commerce City, Colorado, do hereby certify that the attached is a RECALL PETITION SECTION form approved by the Office of the City Clerk, and said form complies with §31-4-502 of the Colorado Revised Statutes.

IN WITNESS WHEREOF I have hereunto set my hand and the seal of Commerce City this

_____ day of _____, 20____.

_____
Laura J. Bauer, City Clerk

CITY
SEAL

WARNING: IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same measure or to sign such petition when not a registered elector. Do not sign this petition unless you are a registered elector. To be a registered elector, you must be a citizen of Colorado and registered to vote in Commerce City. Do not sign this petition unless you have read or have had read to you the proposed measure in its entirety and understand its meaning.

Petition to Recall _____ from the office of _____

(name of person) (Title of Office

The following "committee" represents the petition signers in all matters affecting this recall petition:

1. Name: _____
   Mailing Address: _____
   _____

2. Name: _____
   Mailing Address: _____
   _____

3. Name: _____
   Mailing Address: _____
   _____

4. Name: _____
   Mailing Address: _____
   _____

5. Name: _____
   Mailing Address: _____
   _____

Grounds for Recall:

_____

General statement not to exceed 200 words

_____

_____

SIGNATURE OF REGISTERED ELECTOR	PRINTED NAME OF REGISTERED ELECTOR	PLACE OF RESIDENCE (STREET ADDRESS)	CITY	DATE OF SIGNATURE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

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(name of person) (Title of Office

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Affidavit of Circulator

I, _____, affirm that I have read and understand the laws governing the circulation of petitions; that I am at least eighteen (18) years of age at the time this petition section was circulated and signed by the listed electors; I personally circulated the attached petition section; that each signature thereon was affixed in my presence; that each signature thereon is the 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; and that I have not paid or will not in the future pay and 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.

_____ _____

Printed Name of Circulator Circulator's Signature

_____ _____

Circulator's Residence Address (Street name & number) Date Signed by Circulator

_____

Circulator's City, County, and State of Residence

STATE OF COLORADO)
)
COUNTY OF ADAMS) SS.
)
CITY OF COMMERCE CITY)

The foregoing instrument was acknowledged before me on this ___ day of _____, _____ by _____.

Witness my hand and official seal.

My Commission expires: _____

_____

Notary Public