

BALLOT QUALIFYING INITIATIVE PETITION- PAID CIRCULATOR

WARNING

It is a felony for anyone to sign any initiative or referendum petition with any name other than his own, or to knowingly sign his name more than once for the measure, or to sign such petition when he is not a qualified elector.

CONTACT PERSON/ORGANIZATION

The contact person/organization in all matters affecting this initiative petition and to whom all notices or other information concerning this initiative petition shall be mailed is:

Name of individual or organization: _____

Mailing address of individual or organization: _____

Phone number for the individual or organization: _____

Email address for the individual or organization: _____

INITIATIVE PETITION

To the Honorable Jamie Heinzerling, Director and City Clerk, Department of the City Clerk of the city of Boise City, State of Idaho:
“We, the undersigned citizens and qualified electors of the city of Boise City, State of Idaho, respectfully demand that the following proposed law

SHORT TITLE

**<<<SHORT TITLE IN STATUTORILY REQUIRED 20 FONT PRINT –
INSERTED HERE>>>**

GENERAL TITLE

<<<LONG TITLE - suggest using 11 OR 12 FONT – INSERTED HERE>>>

Be It Enacted by the Mayor and City Council of Boise that Boise City Code <<< amend [fill in code section being amended] or be amended to add [fill in new code section or chapter] >>> to read as follows:

<<<PETITIONER FILLS IN THE FULL BODY OF THEIR PROPOSED MEASURE’S LANGUAGE>>>

...shall be submitted to the qualified electors of the city of Boise City, State of Idaho, for their approval or rejection at the regular general City election, to be held on the (General Election Date) _____ day of (Month) _____ A.D., (Year) _____, and each for himself says: I have personally signed this petition; I am a qualified elector of the city of Boise City, State of Idaho; my residence and city are correctly written after my name.”

Signature	Printed Name	Residence Street + Number	City	Date
1				
2				
3				
4				
5				
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7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
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19				
20				

State of Idaho)

)ss.

County of Ada)

I, _____, being first duly sworn, say that I am a resident of the State of Idaho and at least eighteen (18) years of age; that every person who signed this sheet of the foregoing petition signed his or her name thereto in my presence, after I verbally notified each individual signer that I will receive payment in exchange for gathering the signatures on this sheet; I believe that each has stated his or her name, address and residence correctly; that each signer is a qualified elector of the State of Idaho and a resident of the county of _____.

I am accepting payment for the circulation of the foregoing petition by _____ and the address of such payor is _____.

PETITION CIRCULATOR

Petition Circulator's Printed Name and Signature

Printed Name: _____

Signature: _____

Petition Circulator's Residential Address:

Street Address: _____

City, State + Zip Code: _____

Subscribed and sworn to before me this _____ day of _____, _____.

DAY

MONTH

YEAR

(Notary Seal)

Notary Public: _____

Residing at: _____