Office of the Secretary of State / Elections Division Petition For Recall of Elected Official

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	e undersigned, hereby seek the ne ground(s) that: (state specific	grounds)	from the office of		
and	declare that I am a registered ele	ector of	County, Kansas, and of the election	on district of the officer nan	ned above.
	Signature of Signer	Name of Signer (Print)	Street Number or Rural Route	Name of City	Date of
			(as registered)		Signing
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
ϵ		g you are not a registered elector.	petition, to knowingly sign more than once for	or the recall of the same officer a	t the same
	Printed Name	<u>Signature</u>	Residence	e Address	
3. A	A list of all petition circulators authorize	zed to circulate petitions for this recall	may be examined in the office of the	Count	y election officer.

Affidavit

STATE OF KANSAS

COUNTY OF	
of this recall petition, the only person that has circulated this copy of the petition. The signatures found hereon were made in my actual presence and to the best of my knowledge the signatures are those of th persons whose names they purport to be. I have circulated this petition in the manner provided by K.S. 25-4301 et seq., and being duly sworn state the grounds for recall are true.	of this recall petition, the only person that has circulated this copy of the petition. The signatures found hereon were made in my actual presence and to the best of my knowledge the signatures are those of the persons whose names they purport to be. I have circulated this petition in the manner provided by K.S.A. 25-4301 et seq., and being duly sworn state the grounds for recall are true.
Signature of Sponsor	
Address of Sponsor	
Subscribed and sworn to before me this day of _	, 20
(SEAL)	Person authorized to administer oaths
My appointment expires	