

PETITION FOR RECALL OF _____

Date Issued: _____ Issued to _____

Committee of the Petitioner (5 members):

Name of Circulator _____ Page 1 of ___ blank pages issued

Name					
Address					

TO THE CITY COUNCIL OF THE CITY OF EDINBURG, TEXAS: THE UNDERSIGNED QUALIFIED VOTERS OF EDINBURG, TEXAS DO HEREBY SEEK THE RECALL OF _____

Signature	Printed Name	Street and Number of Place of Residence	City of Residence	Date of Birth	Voter Registration Number	Date Signed
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

STATE OF TEXAS, COUNTY OF HIDALGO:

***Note: Pursuant to state law, the signer must include either: 1) his/her date of birth or 2) voter registration number.**

CITY SECRETARY SEAL:

_____, being duly sworn, deposes and says that he/she, and he/she only, personally circulated the foregoing paper, that all the signatures appended thereto were made in his/her presence and that he/she believes them to be the genuine signatures of the persons whose names they purport to be.

Sworn and subscribed to before me this ____ day of _____ 20____.

X _____
Notary Public (or other officer, authorized to administer oaths)

The foregoing affidavit shall be strictly construed and any affiant convicted of swearing falsely as regards to any particular thereof shall be punishable in accordance with existing law.

SIGNED _____
(Signature of Circulator)

Ludivina Leal, City Secretary