RECALL PETITION

This petition seeks to recall (name of official) from the office of (name of office).

The grounds for this recall petition are:

(include grounds).

This petition is issued on ( ). Signatures on this petition must be secured within 60 days from this date.

SIGNATURE PRINTED RESIDENCE MAILING DATE

 NAME ADDRESS ADDRESS

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The total number of signatures on this petition is:

STATE OF ALASKA )

 )ss

( ) JUDICIAL DISTRICT )

STATEMENT OF (name of sponsor who circulated petition)

I, (name of sponsor who circulated petition), having been first duly sworn, swear that I personally circulated this petition, that all signatures were affixed in my presence, and that I believe them to be those of the persons whose names they purport to be.

DATE NAME

SUBSCRIBED AND SWORN TO before me on .

 (date)

 Notary Public in and for the State of Alaska