

ATTENTION VOTERS: Before signing, read "Signer Information" on other side.

ATTENTION REGISTRARS: Before certifying signatures, see "Instructions to Registrars" below.

CHECK NUMBER	NAME AS REGISTERED	STREET, NUMBER AND APARTMENT NUMBER, IF ANY (CITY OR TOWN WILL BE THE SAME AS STATED ABOVE)	REGISTRATION STATUS	
			REGISTRATION DATE	CITY OR TOWN
26	I SIGNATURE to be made in person with name substantially as registered (except in case of physical disability as stated above)	II NOW REGISTERED AT		WAIVED
27		(street, number and apartment number, if any) (city or town will be the same as stated above)		
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WARNING - criminal penalty for unlawfully signing, altering, defacing, mutilating, destroying or suppressing this petition: fine of up to \$1,000 or imprisonment for up to one year

INSTRUCTIONS TO REGISTRARS

- You must time-stamp or write in date and time these papers are received.
N - no such registered voter at that address, or address is illegible.
S - unable to identify signature that of voter because of form of signature, or signature is illegible.
W - wrong district or community.
- Check thus ✓ against the name of each qualified voter to be certified. Draw a line through any blank spaces not containing signatures.
A - Each sheet must be certified by at least three registrars. A facsimile stamp is acceptable.
- For names not certified use the code below.
T - already signed nomination paper for this candidate.

CERTIFICATION OF NAMES

We certify that _____ month and day _____
number of names (use numbers and words)

above signatures checked thus ✓ are the names of qualified voters from this city or town as well as the district for which this nomination is made.

At least three registrars names must be signed or stamped below.

city or town	month and day
Registrars of Voters or Election Commissioners of	city or town

CHARTER REVISION OR ADOPTION PETITION



CITY OR TOWN _____

INSTRUCTIONS TO SIGNERS

For your signature to be valid, you must be a registered voter in the city or town named above and your signature should be written substantially as registered.

If you are prevented by physical disability from writing, you may authorize some person to write your name and residence in your presence.

Sign your name in column I and your address in column II.

Attention Registrars: Before certifying signatures see "Instructions to Registrars" on reverse side.

SIGNERS' STATEMENT

We, request that the (city, town) of Four Haven revise its present charter or adopt a new charter. We certify that we are registered voters of that (city, town) whose residence addresses at the times set forth below were as shown below, and that we have not signed this petition more than once.

CHECK I II III IV V VI VII VIII IX X XI XII XIII XIV XV XVI XVII XVIII XIX X XX XXI XXII XXIII XXIV XXV	SIGNATURE to be made in person with name substantially as registered (except in case of physical disability as stated above)	ADDRESS (street, number and apartment number, if any) (city or town will be the same as stated above)	WARD PRECINCT																									
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Signer Information