Town of Bel Air Referendum Petition

EXHIBIT A - Amended

Resolution, Ordinance, or Charter Amendment Number

Resolution, Ordinance, or Charter Amendment Title

We, the undersigned voters of the Town of Bel Air, hereby petition to refer the resolution, ordinance, or Charter amendment identified above to a vote of the registered voters of the Town of Bel Air for approval or rejection at the next general election or at a special election at the discretion of the Board of Town Commissioners.

If the full text of the resolution, ordinance, or Charter amendment referred does not appear on the back of this signature page, a full text of the resolution, ordinance, or Charter amendment must be immediately available from the petition circulator.

NOTICE TO SIGNERS: Sign and print your name (1) as it appears on the voter registration list, OR (2) your surname of registration AND at least one full given name AND the initial of any other names. Please print or type all information other than your signature. Post Office Box addresses are not generally accepted as valid. By signing this petition, you agree that the resolution, ordinance, or Charter amendment identified above should be placed on the ballot as a referendum question at the next general election or at a special election at the discretion of the Board of Town Commissioners and that, to the best of your knowledge, you are registered to vote in the Town of Bel Air and reside in the Town of Bel Air and are eligible to have your signature counted for this petition.

Please Note: The information you provide on this petition is public information.

1	Print Name:	First Name	Middle Name	Last Name		
	Signature:				Date of Signature:	Month Day Year
	Bel Air Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip Code
2	Print Name:	First Name	Middle Name	Last Name		
	Signature:				Date of Signature:	Month Day Year
	Bel Air Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip Code
3	Print Name:	First Name	Middle Name	Last Name		
	Signature:				Date of Signature:	Month Day Year
	Bel Air Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip Code
4	Print Name:	First Name	Middle Name	Last Name		
	Signature:				Date of Signature:	Month Day Year
	Bel Air Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip Code
5	Print Name:	First Name	Middle Name	Last Name		
	Signature:				Date of Signature:	Month Day Year
	Bel Air Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip Code

Individual Circulator's printed or typed name

Residence Address

City State Zip

Telephone (including area code)

Circulator's Affidavit Under penalties of perjury, I swear (or affirm) that: (a) I was at least 18 years old when each signature was obtained; (b) I reside in the Town of Bel Air; (c) I am a registered voter of the Town of Bel Air; (d) the information given to the left identifying me is true and correct; (e) I personally observed each signer as he or she signed this page; and (f) to the best of my knowledge and belief: (i) all signatures on this page are genuine; and (ii) all signers are registered voters of the Town of Bel Air. (Sign and Date when signature collection is completed)

Circulator's Signature Date mm/dd/yyyy

Adopted by Resolution No. 1205-23