

The circulator of the petition is a (mark one): paid signature gatherer volunteer signature gatherer.  
 If the petition circulator does not comply with all of the requirements of the Michigan election law for petition circulators, any signature obtained by that petition circulator on that petition is invalid and will not be counted.

**LOCAL PROPOSAL - \_\_\_\_\_  
 INITIATION OF ORDINANCE**

To the **Clerk of the Township of \_\_\_\_\_**: We, the undersigned qualified and registered electors, residents in the Township of \_\_\_\_\_; \_\_\_\_\_ County, State of Michigan, respectively, petition to initiate an ordinance to provide for the number of Adult Use Retail Establishments allowed within the township limits to be submitted to the electors of the city at the next regular election pursuant to the Michigan Regulation and Taxation of Marihuana Act, MCL 333.27956(1). By promulgating the proposed "OPEN STORES ORDINANCE," the "MARIJUANA ESTABLISHMENTS PROHIBITED" Ordinance \_\_\_\_\_, being section \_\_\_\_\_ of the \_\_\_\_\_ Code of Ordinances, adopted \_\_\_\_\_, and any existing ordinances, parts of ordinances or sections in conflict with provisions of this Ordinance would be repealed only to the extent necessary to give this Ordinance full force and effect.

FOR THE FULL TEXT OF THE PROPOSED ORDINANCE SEE THE REVERSE SIDE OF THIS PETITION

**WARNING - A person who knowingly signs this petition more than once, signs a name other than his or her own, signs when not a qualified and registered elector, or sets opposite his or her signature on a petition, a date other than the actual date the signature was affixed, is violating the provisions of the Michigan election law.**

SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING		
				MO	DAY	YEAR
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

**CERTIFICATE OF CIRCULATOR**

The undersigned circulator of the above petition asserts that he or she is 18 years of age or older and a United States citizen; that each signature on the petition was signed in his or her presence; that he or she has neither caused nor permitted a person to sign the petition more than once and has no knowledge of a person signing the petition more than once; and that, to his or her best knowledge and belief, each signature is the genuine signature of the person purporting to sign the petition, the person signing the petition was at the time of signing a registered elector of the city or township indicated preceding the signature, and the elector was qualified to sign the petition.

If the circulator is not a resident of Michigan, the circulator shall make a cross or check mark in the box provided, otherwise each signature on this petition sheet is invalid and the signatures will not be counted by a filing official. By making a cross or check mark in the box provided, the undersigned circulator asserts that he or she is not a resident of Michigan and agrees to accept the jurisdiction of this state for the purpose of any legal proceeding or hearing that concerns a petition sheet executed by the circulator and agrees that legal process served on the Secretary of State or a designated agent of the Secretary of State has the same effect as if personally served on the circulator.

**WARNING - A circulator knowingly making a false statement in the above certificate, a person not a circulator who signs as a circulator, or a person who signs a name other than his or her own as circulator is guilty of a misdemeanor.**

**CIRCULATOR - Do not sign or date certificate until after circulating petition.**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 (Signature of Circulator) (Date)

\_\_\_\_\_  
 (Printed Name of Circulator)

\_\_\_\_\_  
 (Complete Residence Address (Street and Number or Rural Route) [Do not enter a post office box])

\_\_\_\_\_  
 (City or township, state, zip code)

\_\_\_\_\_  
 (County of registration, if registered to vote, of a circulator who is not a resident of Michigan)

Paid for with regulated funds by: \_\_\_\_\_ Survey Committee PO Box # \_\_\_\_\_