HOW TO COMPLETE YOUR PETITION

Petition to Recall the Mayor of Aurora | Volunteer instruction sheet

1. WHO MAY SIGN

The petition states that signers must be registered and duly qualified voters of the City of Aurora, Illinois. Each signer must personally provide their own information and signature.

2. LEAVE THE YES / NO BOXES BLANK

We, the undersigned registered and duly qualified voters of the City of Aurora, Illinois, do hereby petition that the following binding referendum question be placed before the voters in all precincts of the City of Aurora, to be voted upon at the Consolidated Election to be held on April 6, 2027:

3. COMPLETE ONE SIGNER ROW AT A TIME

NOTE: Make sure the printed name and address are legible.

FICTIONAL EXAMPLE ONLY — NOT REAL SIGNER INFORMATION

PRINTED NAME	VOTER'S SIGNATURE	STREET ADDRESS	CITY	COUNTY & STATE
1 John Doe	*John Doe*	123 Example St.	Aurora	County, IL
2.			Aurora	County, IL
3.			Aurora	County, IL
4.			Aurora	County, IL
5.			Aurora	County, IL
6.			Aurora	County, IL
7.			Aurora	County, IL
8.			Aurora	County, IL
9.			Aurora	County, IL
10.			Aurora	County, IL

EXAMPLE

PRINTED NAME
Print your full name clearly.

VOTER'S SIGNATURE
Sign your own name in this column.

STREET ADDRESS
Write your residential street address.

CITY / COUNTY & STATE
Aurora and IL are preprinted. Complete the county for your residence.

John Doe, the sample signature, and the example address are fictional. Do not copy them as real information.

4. LEAVE THE CIRCULATOR / NOTARY SECTION FOR RETURN

State of _____)
) SS.
County of _____)

I, _____ (circulator's printed name) do hereby certify that I reside at _____ in the City/Village/Unincorporated Area (circle one) of _____ (if unincorporated, list municipality that provides postal service) Zip Code _____, County of _____, State of _____that I am 18 years of age or older, that I am a citizen of the United States, and that the signatures on this sheet were signed in my presence and are genuine; that all of the signatures on this sheet were signed within the statutory time period for petition circulation; and that to the best of my knowledge and belief the persons so signing were at the time of signing the petition duly qualified and registered voters of the City of Aurora, Illinois, and that their respective residences are correctly stated, as above set forth.

_____
(Circulator's Signature)

Signed and sworn to (or affirmed) by _____ before me, on _____, 2026
(Name of Circulator) (insert month, day)

(SEAL)

_____
(Notary Public's Signature)

SHEET NO. _____

DO NOT SIGN IN ADVANCE.

When you return the sheet or arrange pickup, an Aurora for Change representative will assist with this section. A notary will be present.

The circulator must truthfully complete and sign the affidavit in the notary's presence.

TO ARRANGE PICKUP OR DELIVERY
Call or text Danny Souri
630-669-2180

Petition to Recall the Mayor of Aurora

We, the undersigned registered and duly qualified voters of the City of Aurora, Illinois, do hereby petition that the following binding referendum question be placed before the voters in all precincts of the City of Aurora, to be voted upon at the Consolidated Election to be held on April 6, 2027:

Shall John Laesch be recalled and removed from the Office of Mayor of the City of Aurora?	☐ **YES** ☐ **NO**

PRINTED NAME	VOTER'S SIGNATURE	STREET ADDRESS	CITY	COUNTY & STATE
1.			Aurora	County, IL
2.			Aurora	County, IL
3.			Aurora	County, IL
4.			Aurora	County, IL
5.			Aurora	County, IL
6.			Aurora	County, IL
7.			Aurora	County, IL
8.			Aurora	County, IL
9.			Aurora	County, IL
10.			Aurora	County, IL

State of _____)
) SS.
County of _____)

I, _____ (circulator's printed name) do hereby certify that I reside at _____ in the City/Village/Unincorporated Area (circle one) of _____ (if unincorporated, list municipality that provides postal service) Zip Code _____, County of _____, State of _____that I am 18 years of age or older, that I am a citizen of the United States, and that the signatures on this sheet were signed in my presence and are genuine; that all of the signatures on this sheet were signed within the statutory time period for petition circulation; and that to the best of my knowledge and belief the persons so signing were at the time of signing the petition duly qualified and registered voters of the City of Aurora, Illinois, and that their respective residences are correctly stated, as above set forth.

_____
(Circulator's Signature)

Signed and sworn to (or affirmed) by _____ before me, on _____, 2026
(Name of Circulator) (insert month, day)

(SEAL)

_____
(Notary Public's Signature)

SHEET NO. _____