

CLARITY HEARING REQUEST

JUN 15 2011

KRISTEN MILLARD
MONTCALM COUNTY CLERK

I, Deanna Jo Porter, hereby certify that I am a register voter in the

73 dist. Montcalm and that this recall petition wording is being submitted for the

recall of Judy Emmons from the office of Senator.

Deanna Jo Porter
Signature of Filer

Kristen Millard
County Clerk

Deanna Jo Porter
Printed name of Filer

6/15/11
Date

90 Ann St
Address of Filer

Stanton, Mi 48888

989 831 578
Telephone Number

Subscribed and sworn to before me on the 15th day of June, 2011.

Kristen Millard
Signature of Notary

Name of Notary: KRISTEN MILLARD
Notary Public, State of Michigan, County of Montcalm
My Commission expires: 11-17-2012

RECALL PETITION

INSTRUCTIONS ON REVERSE SIDE

We, the undersigned, registered and qualified voters of the City of Battle Creek, in the County of Montcalm, and State of Michigan, petition for **STRIKE ONE** Michigan State Senator Judy Emmons, 33rd District, for the following reason(s): While a member of the Michigan State Senate on May 12, 2011 Senator Judy Emmons voted yes on Michigan House Bill 4361 (S-5), as amended.

While a member of the Michigan State Senate on May 12, 2011 Senator Judy Emmons voted yes on Michigan House Bill 4361 (S-5), as amended.

WARNING -- A PERSON WHO KNOWINGLY SIGNS A RECALL PETITION MORE THAN ONCE OR SIGNS A NAME OTHER THAN HIS OR HER OWN IS VIOLATING THE PROVISIONS OF THE MICHIGAN ELECTION LAW.

FOR CLERK'S USE ONLY	SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING		
					Month	Day	Year
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CIRCULATE OF CIRCULATOR
 The undersigned circulator of the above petition asserts that he or she is a qualified and registered elector of the electoral district of the official whose recall is sought; that each signature on the petition was signed in his or her presence and was not obtained through fraud, deceit or misrepresentation; and that he or she 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. The undersigned circulator of the above petition further asserts that to his or her best knowledge, information 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 qualified registered elector of the City or Township listed in the heading of the petition; and the elector was qualified to sign the petition.

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) _____

(City or Township Where Registered) _____

Complete Residence Address (Street and Number or Rural Route) _____ / (Zip Code) _____