CITY OF SAINT PAUL PROPOSED CHARTER AMENDMENT PETITION

All information mu	SIGNER'S OATH "I swear (or affirm) that I know the contents and purpose of this petition and that I signed the petition only once and of my own free will." All information must be filled in by the person(s) signing the petition unless disability prevents the person(s) from doing so. All information on this petition is subject to public inspection.					
2.	SIGNATURE	YEAR OF BIRTH	NAME	Address	СПҮ	
	NAME 1. 2. 3. 4. 5.		ADDRESS			
Affidavit of Petition Circulator presence, and that the affiant be Signed(Signature of Circulator	elieves them to be the genuine s	g duly sworn, deposes and signatures of the persons v	d says that the affiant, and the affiant only, personally whose names they purport to be. Subscribed and sworn to me this	circulated the foregoing paper, that all the signatures append day of, 201	ded thereto were made in the affiant'ः	