CITY OF SAINT PAUL REFERENDUM PETITION

We, the under	rsigned registered voters i	in the City of Saint Paul	hereby petition that the fo	llowing ordinance or resolution be subject	ed to a referendum	l .	
"I swear (or af	ffirm) that I know the conte	ents and purpose of this	SIGNER'S OATH petition and that I signed	the petition only once and of my own free	will."	 	
All inforn	nation must be filled in by the p	person(s) signing the petition YEAR OF BIRTH	unless disability prevents the p	erson(s) from doing so. All information on this peti	tion is subject to public	inspection.	
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			AFFIDAVIT OF PETITION CI	RCULATOR			
State of Minnesota County of Ramsey							
I,signed this petition	(Name of Circulator)	, swear (or affirm) that I am a	resident of the City of Saint Paul and	d that each signature on this petition was affixed in my pre	esence by the person purp	orting to have	
Signed((Signature of Circulator)		Subscribed and swo	orn to me this day of, 20	02		
Page of			Notary Public (or other officer authorized to administer oaths)				