

RECALL PROCEDURE

1. Persons must have been in office at least 6 months. This date is figured from date last elected. Petitions cannot be filed during the last 6 months of their term in office. A petition demanding the recall of a County Commissioner or Township, City, or School Official, shall be filed with the County Clerk.
2. Only one person can be named on a petition. Separate petitions must be used for each person being recalled but wording can be the same. A sponsor of a recall petition wording must provide their name, address, and telephone number.
3. Petition wording must be approved by the Marquette County Election Commission before circulation for signatures. They have from 10 to 20 days to rule on the petition clarity. Each reason for recall must be stated clearly and based upon conduct during the officer's current term of office.
4. Board of Election Commissioners shall notify the person whom recall is against. Such notice must be made within 24 hours of receipt of filing of petition wording for clarity.
5. All parties may attend the County Election Commission Hearing for clarity.
6. The determination of the Board of Election Commission may be appealed by either party to the circuit court of the County. Appeal must be filed not more than 10 days after the clarity hearing.
7. Petition sheets must contain signatures, address, city and date signed of each person signing the petition.
8. Petition must have signatures equal to 25% of the vote cast in the district, of the total vote cast for all governor candidates in the last election in which a governor was elected. Upon written demand, the County Clerk, within 5 days, shall certify the minimum number of signatures required.
9. All signatures must be obtained within a 90 day period (counting back from filing date). Signed petitions must be filed within 180 days of clarity approval by Election Commission or Circuit Court (if there's an appeal).
10. Circulator of petition must be a qualified and registered elector of the unit of government and residing in the district indicated on the petition. Circulator signs certificate on front of each petition he/she circulates and dates only after petition has been completed. Date of circulator signing must be the last date on the petition.
11. When petitions are completed and filed with the County Clerk a receipt is issued showing estimated number of signatures and exact number of sheets filed. This shall constitute the total filing and no additional petition sheets will be accepted for filing by filing officials.
12. The County Clerk with whom the recall petition is filed will determine within 35 days of filing, the sufficiency of the petition. If the petition is insufficient the person sponsoring the recall shall be so notified. If the petition is sufficient, the County Clerk shall schedule a Special Recall Election on the next regular election date that is not less than ~~70~~ ⁷⁵ days after the date the Recall Petition was filed.

AFFIDAVIT

I, **Connie M. Branam**, Clerk of the County of Marquette, do certify the number of votes cast for Governor in the (Township/City/District) _____ is _____. The minimum number of signatures needed to force a recall election of _____ is _____.

Dated: _____

Connie M. Branam, Marquette County Clerk

TO BE COMPLETED BY CITY OR TOWNSHIP CLERK

Check the registration of each person whose name appears on the reverse side of this petition sheet **whose name is not coded** in the left-hand column.

If the person was registered to vote in your City or Township on the date he or she signed the sheet, place a check mark before the person's name.

If the person was not registered to vote in your City or Township on the date he or she signed the sheet, enter "NR" (not registered) before the person's name.

If the address listed by the person does not fall within your City or Township, enter "NC" (not in community) before the person's name.

Complete the following certificate after making the registration checks:

I hereby certify that the total number of persons whose names appear on the reverse side of this petition sheet who I identified as being registered in my City or Township on the date of signing the petition sheet is: _____
(Enter Number)

(Signature of City or Township Clerk)

City of _____
 Township of _____
(Name of City or Township)

READ BEFORE CIRCULATING PETITION

The validity of signatures placed on this petition may be affected if the following is not observed.

Complete the heading of the petition before circulating it.

- Enter the city or township and county where the petition will be circulated. Indicate whether the jurisdiction listed is a "city" or a "township." Do not list more than one city or township.
- Enter the officer's complete name and the office he or she holds. Include the district number of the office if there is one.
- Enter the reason(s) why the recall election is being sought. The language entered must be exactly as approved by the County Election Commission.

Make sure that all signers properly complete the petition.

- Each signer must be registered to vote in the city or township listed in the heading.
- Each signer must sign and print his or her first and last name*.
- Each signer must enter his or her full address. A rural route number is acceptable. A post office box is not acceptable.
- Each signer must enter his or her post office. A signer's post office is the community name that appears in the signer's mailing address.
- Each signer must date his or her signature with the month, day and year.

Complete the circulator's certificate after circulating the petition.

- Sign and print your full name and enter the month, day and year*. Signatures on the petition which are dated after the date on the circulator's certificate are invalid.
- Enter the name of the city or township where you are registered. You must be registered to vote in a city or township represented by the officeholder whose recall is sought.
- Enter your full address. A rural route number is acceptable. A post office box is not acceptable.
- Enter your post office. Your post office is the community name that appears in your mailing address.

Circulate the petition properly.

- Do not fail to question signers on their city or township of registration.
- Do not complete the heading of the petition after signatures have been affixed on the petition.
- Do not fill in a signer's address or a signer's signature date. Both entries must be in the signer's own handwriting. Ditto marks are not acceptable in these two entries.
- Do not leave the petition unattended.

* **The failure of the circulator or an elector who signs the petition to print his or her name or to print his or her name in the proper location does not affect the validity of the circulator's or signer's signature. However, a printed name located in the space designated for printed names does not constitute the signature of the circulator or elector.**



RECALL PETITION

FOR CLERK'S USE ONLY

We, the undersigned, registered and qualified voters of the City _____, in the County of _____, and State of Michigan, petition for the calling of an election to recall _____ (Name of Officer) from the office of _____ (Title of Office), _____ (District, if Any) for the following reason(s):

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.

✓	SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	POST OFFICE	DATE OF SIGNING		
					MONTH	DAY	YEAR
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							

CERTIFICATE 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 on 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 Address (Street and Number or Rural Route) (Post Office)