Instructions to Circulators

Candidate Petitions

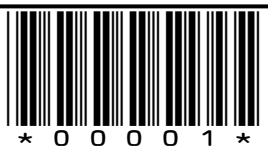
School District Director

1. A *Candidate Petition of Nomination* may consist of multiple petition sections, but only one person may circulate a petition section.
2. Do not take the petition section apart. If you do, the signatures will not count.
3. Each petition section is bound in a blue manuscript cover and contains:
    a. An *Instructions to Circulators* and *Vacancy Committee Nomination* page;
    b. Several numbered *Signature Pages* that contain a *Warning* section at the top of each page; and
    c. An *Affidavit of Circulator* page.
4. Read the *Warning* in this petition section before collecting signatures.
5. When collecting signatures:
    a. Only the signer may complete the entire signature block.
        i. A signer should provide his or her residential address instead of a mailing address.
        ii. If a signer makes a minor correction, have the signer initial the change. For major corrections, the signer must completely cross out the signature block and proceed to the next one.
        iii. The law prohibits you from assisting a signer. If a signer needs assistance for any reason, a third person must provide the assistance. Then, in the next signature block, the assistor must provide his or her name and address, and state that he or she assisted the signer.
    b. You must accompany this petition section at all times. Do not leave it unattended or pass it around unaccompanied among potential signers.
6. After collecting signatures:
    a. Fill out and sign the *Affidavit of Circulator* in the presence of a notary public and have the notary public witness the signing of the affidavit and stamp it with a seal.
    b. Do not collect additional signatures after the *Affidavit of Circulator* has been notarized.
    c. Turn in this petition section, even if not every signature block is completed.

Vacancy Committee Nomination – List one or more eligible electors

The following eligible electors are appointed as a committee to fill any vacancy in this nomination:

Name	Residential Address
Name	Residential Address
Name	Residential Address

SECTION: 

Warning Statement and Signature Page

WARNING, IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same candidate or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote and eligible to vote in School District No. 1, City and County of Denver, State of Colorado, elections.

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning. (C.R.S. § 1-4-902(2))

Petition to nominate _____to the office of:

(Check one) ◯ **Director District #** _____

◯ **At Large**

1.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
2.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
3.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
4.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
5.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
6.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
7.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
8.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
9.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
10.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		

Warning Statement and Signature Page

WARNING, IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same candidate or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote and eligible to vote in School District No. 1, City and County of Denver, State of Colorado, elections.

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning. (C.R.S. § 1-4-902(2))

Petition to nominate _____to the office of:

(Check one) ◯ **Director District # _____**

◯ **At Large**

1.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
2.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
3.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
4.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
5.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
6.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
7.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
8.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
9.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
10.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		

Warning Statement and Signature Page

WARNING, IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same candidate or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote and eligible to vote in School District No. 1, City and County of Denver, State of Colorado, elections.

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning. (C.R.S. § 1-4-902(2))

Petition to nominate _____to the office of:

(Check one) ◯ **Director District # _____**

◯ **At Large**

1.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
2.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
3.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
4.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
5.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
6.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
7.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
8.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
9.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
10.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		

Warning Statement and Signature Page

WARNING, IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same candidate or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote and eligible to vote in School District No. 1, City and County of Denver, State of Colorado, elections.

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning. (C.R.S. § 1-4-902(2))

Petition to nominate _____to the office of:

(Check one) ◯ **Director District # _____**

◯ **At Large**

1.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
2.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
3.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
4.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
5.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
6.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
7.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
8.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
9.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
10.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		

Warning Statement and Signature Page

WARNING, IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same candidate or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote and eligible to vote in School District No. 1, City and County of Denver, State of Colorado, elections.

Do not sign this petition unless you have read or have had read to you the proposed nomination petition in its entirety and understand its meaning. (C.R.S. § 1-4-902(2))

Petition to nominate _____to the office of:

(Check one) ◯ **Director District # _____**

◯ **At Large**

1.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
2.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
3.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
4.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
5.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
6.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
7.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
8.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
9.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		
10.	Date	Last Name	First Name		MI	Year of Birth (Optional)
	Address - Number, Street, Unit #		City/County	Signature		

Denver Elections Division

Affidavit of Circulator
Denver School District Director

I, _____, do solemnly affirm under penalty of perjury that:
(Circulator's Printed Name)

1. I have read and understand the laws governing the circulation of petitions;
2. I was a citizen of the United States and at least 18 years of age at the time this petition section was circulated and signed by the listed electors;
3. I circulated this section of the petition;
4. Each signature on this petition was affixed in my presence;
5. Each signature on this petition is the signature of the person whose name it purports to be;
6. To the best of my knowledge and belief each of the persons signing this petition section was, at the time of signing, a registered elector of the City and County of Denver and of School District No. 1;
7. I have not paid or will not in the future pay and I believe that no other person has paid or will pay, directly or indirectly, any money or other thing of value to any signer for the purpose of inducing or causing such signer to sign the petition.
8. I understand that I can be prosecuted for violating the law governing the circulation of petitions, including the requirement that I truthfully completed the affidavit and that each signature thereon was affixed in my presence; and
9. I understand that failing to make myself available to be deposed and to provide testimony in the event of a protest shall invalidate this petition section if it is challenged on the grounds of circulator fraud.

Circulator Name (please print):

_____
Last name *First name*

Permanent Residence Address (or location if homeless):

_____
Street name and number *City/Town* *County* *State* *ZIP Code*

Sign and Date:

_____ _____
Signature of Circulator *Date of Signing*

Note to Notary Public: Do not notarize this petition section unless: (1) the circulator is in your physical presence; (2) the circulator has dated the affidavit and fully and accurately completed all of the personal information on the affidavit; and (3) the circulator presents a form of identification as defined in C.R.S. 1-1-104(19.5).

STATE OF COLORADO
CITY AND COUNTY OF DENVER

Subscribed and sworn to me on this: [SEAL]

_____ day of _____, _____.

My commission expires: _____.

_____
Signature of Notary Public