

2016 Term Limit Petition

Batch # 125

3101 - 3125

STATE OF MARYLAND—CHARTER AMENDMENT PETITION

AMAT 3101 3

To: President of the County Council of Montgomery County

We, the undersigned voters of Montgomery County, hereby petition to have this amendment of the County Charter submitted to a vote of the registered voters of the County, for approval or rejection at the next general election. **It is the intent of this proposed amendment to bar the Members of the Montgomery County Council and the County Executive from serving more than three full or partial consecutive terms of office, although no officeholder who has served three consecutive terms will be barred from running for re-election to more than three non-consecutive terms. This proposed amendment is intended to apply to both current and future officeholders.** The full text of this proposal is printed on the back of this form.

NOTICE TO SIGNERS: Print and sign your name (1) as it appears on the voter registration list, OR (2) your surname of registration and at least one full given name AND the initial of any other names. Please print or type all information other than your signature. Post Office Box addresses are not generally accepted as valid. By signing this petition, you agree that the above-mentioned charter amendment proposal should be placed on the ballot as a question at the next general election and that, to the best of your knowledge, you are registered to vote in Maryland and are eligible to have your signature counted for this petition. Please Note: The information you provide on this petition may be used to change your voter registration address.

DATE (mm/dd/yy)	FIRST NAME,	MIDDLE INITIAL(S),	LAST NAME	PERMANENT RESIDENCE ADDRESS (NO P.O. BOX) (INCLUDE HOUSE NUMBER / APARTMENT NUMBER)	ZIP CODE	DATE OF BIRTH (mm/dd/yy)	E-MAIL
7/9/16	Print: <i>Robert</i>	<i>E</i>	<i>MOORE</i>	Street: <i>9825 Bethe Sten Church Rd</i> <i>APT 103</i> City: <i>DAMASCUS MD</i>	<i>20872</i>		<i>robertmoore33@gmail.com</i> <i>501 246 869</i>
7/9/16	Print: <i>Ron</i>	<i>A</i>	<i>DeWeese</i>	Street: <i>22641 Winding Woods Way</i> City: <i>Clarksburg, MD</i>	<i>20871</i>	<i>11/5/1958</i>	<i>deweesea@gmail.com</i> <i>500 864 370</i>
	Print:			Street:			
	Sign:			City:			
	Print:			Street:			
	Sign:			City:			
	Print:			Street:			
	Sign:			City:			

OK
OK

Adapted form SBE-6-201-SC (rev 4-09)
FOR ELECTION BOARD USE ONLY

Total number of Signatures _____

Number of Invalidated Signatures _____

Number of Valid Signatures _____

Endorsed by: _____

Pgt Fengli
Individual circulator's printed or typed name
10817 Longmeadow Dr
Residence Address
Damascus, MD 20872
City State Zip
301-253-5205
Telephone Number

CIRCULATOR'S AFFIDAVIT
Under penalties of perjury, I swear (or affirm) that: (a) I was at least 18 years old when each signature was obtained; (b) the information given to the left identifying me is true and correct; (c) I personally observed each signer as he or she signed this page; and (d) to the best of my knowledge and belief: (i) all signatures on this page are genuine; and (ii) all signers are registered voters of Maryland.

[Signature]
Circulator's Signature

July 9, 2014
Date (mm/dd/yy)

(Sign and date when signature collection is completed)