

**NOMINATING PETITION
(CONSERVATION DISTRICT NON-PARTISAN)**

We, the undersigned, residents of the _____ Conservation District, in the County(ies) of _____, State of Michigan, hereby nominate _____, whose mailing address is _____, Michigan, as candidate for the office of District Director to be voted for at the Conservation District Annual Meeting to be held on the _____ day of _____, 20__.

This Petition is due to the Conservation District Office by the _____ day of _____, 20__, and the length of the term of office is _____ years.

WARNING: FIVE NOMINATING SIGNATURES REQUIRED. NOMINATIONS MUST BE FROM RESIDENTS OF THE DISTRICT WHO ARE AT LEAST 18 YEARS OF AGE. A PERSON SHALL NOT KNOWINGLY SIGN MORE NOMINATING PETITIONS FOR THE SAME OFFICE THAN THERE ARE PERSONS TO BE ELECTED TO THE POSITION. A PERSON SHALL NOT SIGN A NAME OTHER THAN HIS/HER OWN OR SIGN WITH MULTIPLE NAMES.

Signature	Printed Name	Street Address or Rural Route	Zip Code	Signature Date

**CERTIFICATE OF CIRCULATOR
DO NOT SIGN OR DATE CERTIFICATE UNTIL AFTER CIRCULATING PETITION**

The undersigned circulator of the above petition asserts that he/she is 18 years of age and a resident of the county(ies) and that each nominating signature is the genuine signature of the person purporting to sign the petition, the person signing was, at the time of signing, a resident of the district listed in the hearing of the petition, and the nominator was at least 18 years of age. Failure to follow these requirements will disqualify the circulator from running in the district election.

<u>WARNING:</u> A CIRCULATOR SHALL NOT MAKE A FALSE STATEMENT IN THE ABOVE CERTIFICATE OR SIGN A NAME OTHER THAN HIS/HER OWN AS THE CIRCULATOR.	
Signature of Circulator	Date
Printed Name of Circulator	
Complete Address of Circulator	

Received on:	By:
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