

# INITIATIVE PETITION SUBMISSION COVER PAGE

RETURN TO:  
Missouri Secretary of State  
Elections Division  
600 W. Main St.  
Jefferson City, MO 65101



MISSOURI SECRETARY OF STATE  
JOHN R. ASHCROFT

PHONE: (800) 669-8683  
WEB: <http://www.sos.mo.gov>

*Pursuant to Sections 116.100 and 116.332, RSMo, upon submitting a petition, please provide the following contact information:*

\_\_\_\_\_  
DATE OF SUBMISSION

\_\_\_\_\_  
LAST NAME\*

\_\_\_\_\_  
FIRST NAME\*

\_\_\_\_\_  
STREET ADDRESS\*

\_\_\_\_\_  
CITY\*

\_\_\_\_\_  
STATE\*

\_\_\_\_\_  
ZIP CODE\*

\_\_\_\_\_  
PHONE\*

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
ORGANIZATION

CHECK ONE\*:

A PERSON OR COMMITTEE, OTHER THAN ME, IS FUNDING A PORTION OF THE DRAFTING OR SUBMISSION OF THIS SAMPLE SHEET. (IF YOU ARE REQUIRED TO FILE A STATEMENT OF COMMITTEE ORGANIZATION PURSUANT TO SECTION 130.021.5, RSMo., A COPY MUST BE ATTACHED.)

I AFFIRM THAT NO PORTION OF THE DRAFTING OR SUBMISSION OF THIS SAMPLE SHEET HAS BEEN FUNDED BY A PERSON OR COMMITTEE OTHER THAN ME.

\_\_\_\_\_  
SIGNATURE OF PERSON SUBMITTING THE SAMPLE SHEET\*

\*REQUIRED INFORMATION