

**A CITIZEN PETITION MADE TO THE
BOARD OF ELECTED SUPERVISORS FOR
_____ COUNTY, IOWA**

The following people signing the Petition are current inhabitants of _____ County, Iowa, and said petitioners demand the following:

1. That said Board of _____ County Supervisors go to the Internet Site aarol.com and click on the button *Proposed Iowa Infrastructure Improvement Act* and study it thoroughly.
2. That said Board of County Supervisors make direct contact with both the Iowa State Representative and Iowa State Senator representing the state legislative districts the county is located in within 30 days after receipt of at least 50 signatures urging action by the Board of County Supervisors and they shall:
 - a. Demand in no uncertain terms that such elected officials in the Iowa Legislature study such proposed bill entitled “The Proposed Iowa Infrastructure Improvement Act” and that they act in the way that is meaningful and proper and discuss said proposed bill in legislative committees, etc., with other elected Iowa legislators, and determine whether or not the proposed bill is legal and proper and should or should not be promoted for passage in the Iowa Legislature.
 - b. Demand that said Iowa Legislators make public through the public print media and other public media available in each of the counties they represent and set forth why or why not they will support enactment of such legislation, and to do so within 60 days of the receipt of or mailing of the notice given them by the Board(s) of County Supervisors.

THEREFORE the people below signing this Petition demand that it be complied with to the letter, and further that no prejudice be insinuated whatsoever because of the age of the signers, as all have an interest in outcome, and all signers are taxpayers because monies they earn, saved or are given and spend personally is taxed in one way or another.

All of those signing this petition assert that they have read and basically understand the forgoing.

Print Name: _____ **Date Signed:** _____

Print Address: _____

SIGNATURE: _____ **Age:** _____

Print Name: _____ **Date Signed:** _____

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