



DISTRICT OF COLUMBIA
BOARD OF ELECTIONS
WASHINGTON, DC 20003-4733



PETITION CHALLENGE RECEIPT FOR BALLOT MEASURES
(INITIATIVE, REFERENDUM, OR RECALL)

Date: _____

Time: _____

Measure Title: _____
(print name)

Challenger Name: _____
(print name)

Challenger's Full Address (including Zip Code): _____

I acknowledge receipt of the items indicated below:

- Challenge to a Petition Form
- A Challenge Containing _____ pages

Signature of Board Employee

Signature of Person Filing the Challenge

Name of Person Filing the Challenge: _____
(print name)

Full Address: _____ Zip Code: _____

Daytime Phone Number: _____ E-mail Address: _____