

# PETITION TO ALLOW GREATER REPRESENTATION BEFORE THE COOK COUNTY BOARD OF TAX REVIEW

Please mark your precinct and ward before circulating this petition

We, the undersigned, registered voters in the \_\_\_\_\_ precinct of the \_\_\_\_\_ ward in the city of Chicago, Illinois, pursuant to section 28-1 et seq. of the Illinois Election Code, do hereby petition that the following question of public policy be placed on the ballot and submitted to the voters of said precinct for their approval or disapproval by referendum, in the manner provided by law, at the next regular election to be held at least 78 days after the filing of this petition:

<p style="text-align: center;"><b>“Should taxpayers be allowed to represent themselves, or retain any person other than an attorney to represent them in property tax appeals before the Cook County Board of (Tax) Review?”</b></p>	<input type="checkbox"/>	<b>Yes</b>
	<input type="checkbox"/>	<b>No</b>

Signature of Voter	Address of Voter	City/Village/Town	County
1		Chicago	Cook IL
2		Chicago	Cook IL
3		Chicago	Cook IL
4		Chicago	Cook IL
5		Chicago	Cook IL
6		Chicago	Cook IL
7		Chicago	Cook IL
8		Chicago	Cook IL
9		Chicago	Cook IL
10		Chicago	Cook IL
11		Chicago	Cook IL
12		Chicago	Cook IL
13		Chicago	Cook IL
14		Chicago	Cook IL
15		Chicago	Cook IL

State of Illinois, County of \_\_\_\_\_ )ss.

I, \_\_\_\_\_, being first duly sworn, certify that I reside and am a registered voter at  
(print name of circulator)

\_\_\_\_\_ in the city/village of Chicago  
(print address of circulator) (print the name of your city/village)

in Cook County, Illinois, and certify that the signatures on this sheet were signed in my presence, and are genuine, and further certify to the best of my knowledge and belief the persons so signing were, at the time of signing the petition duly qualified and registered voters of the precinct listed above and that their respective residence addresses are correctly stated as above set forth.

\_\_\_\_\_  
**SIGNATURE OF CIRCULATOR**

Signed and sworn to before me, a Notary Public, by \_\_\_\_\_, this \_\_\_\_\_  
 day of \_\_\_\_\_, \_\_\_\_\_.  
(print name of circulator)

**(SEAL OR STAMP)**

\_\_\_\_\_  
**SIGNATURE OF NOTARY PUBLIC**

Sheet Number \_\_\_\_\_

*Petitions can be xeroxed. Please return notarized petitions to: CFAT 446 N. Wells, Unit #265, Chicago, Illinois 60610  
 Questions ? Call 312.573.0308 or visit [www.fairtaxes.net](http://www.fairtaxes.net) -- Thank You!*

