PETITION FOR REFERENDUM

We, the undersigned registered voters of the City of Geneva, Kane County, State of Illinois, pursuant to section 2B-1, *et seq,* of the Illinois Election Code, hereby PETITION that the following advisory question of public policy be placed on the ballot and submitted to the voters of the City of Geneva for their approval or disapproval, by referendum, at the Consolidated Election to be held on the 2nd day of November, 2004.

Shall the ordinance authorizing the City of Geneva, Kane County, Illinois to acquire, construct, own and/or operate a community antenna television system, to provide cable television, internet and/or telephone services via a fiber optic network to the home/business, with said utility prohibited from using tax-backed financing, take effect?	Yes	
	No	

Signature of Voter	Address of Voter	City	County / State
1		Geneva	Kane, IL
2		Geneva	Kane, IL
3		Geneva	Kane, IL
4		Geneva	Kane, IL
5		Geneva	Kane, IL
6		Geneva	Kane, IL
7		Geneva	Kane, IL
8		Geneva	Kane, IL
9		Geneva	Kane, IL
10		Geneva	Kane, IL

State of Illinois }
Kane County }ss.

I, _____, being duly sworn, do hereby certify that I reside at _____
Print name of circulator here **Print address of circulator here**
in the Village/City/Town of _____, in the County of _____, State of _____. I further certify that I am 18 years
Print circulator's municipality, county and state of residence here
of age or older, that I am a citizen of the United States, and that the signatures on this sheet were signed in my presence, not more than 90 days preceding the last day for filing of the petitions and are genuine and that to the best of my knowledge and belief the persons so signing were, at the time of signing the petition, registered voters of the political division in which the candidates are seeking election, and that their respective residential addresses are correctly stated as above set forth.

_____
SIGNATURE OF CIRCULATOR

Signed and sworn to before me, a
Notary Public, by _____
Print Name of Circulator Here
On this _____ day of the month of _____, 200___.
(Insert Month, day and year of notarization)

_____
Signature of Notary Public

SEAL OR STAMP

Sheet Number _____
(**Circulator: Do not fill in sheet number**. The candidates will fill this in before filing the petition.)