# **Instructions for Recall Petitions**

### FOR PETITION SIGNERS

### 1. BEFORE YOU SIGN

- A. Read the warning at the top of the page.
- B. Make sure you are a registered voter in the Boulder Valley School District.
- C. Do not sign for anyone else.
- D. The petition circulator may not assist you. If you need assistance, a third party should provide it. Immediately following your name, the assistor must sign his or her name, provide an address, and state that he or she assisted you.

### 2. HOW TO SIGN

- A. Print clearly.
- B. Completely fill out the signature block. Do not use ditto marks.
- C. Use black or blue ink.
- D. List your residence address (including street name and number) where you are registered to vote.
- E. Place today's date under "Date of Signing."F. Corrections: To make a small correction, simply initial the change. If you need to make a larger correction, completely cross out the mistake and proceed to the next signature block.

### FOR PETITION CIRCULATORS

### 3. TO CIRCULATE A PETITION

- A. Only one person may circulate each petition section.
- B. You must accompany the petition at all times. Do not leave the petition unattended or pass it unaccompanied among potential signers.
- C. You must witness every signature block as the signer completes it.
- D. Do not take the petition section apart or remove the original staples.
- E. Make sure that the signature block is complete before a signer leaves.
- AFTER COLLECTING SIGNATURES 4.
  - A. Turn in this petition section, even if not every signature block is completed.
  - B. Personally take this petition section to a notary public for notarization.
    - WARNING: You may only complete your affidavit when in front of the notary. Do not sign or date it beforehand. Do not fill out the notary's section.
  - C. You may not collect additional signatures on this petition section after the affidavit has been notarized.

#### WARNING: IT IS AGAINST THE LAW:

For anyone to sign this petition with any name other than one's own or to knowingly sign one's name more than once for the same measure or to knowingly sign the petition when not a registered elector.

Do not sign this petition unless you are an eligible elector. To be an eligible elector you must be registered to vote and eligible to vote in Boulder Valley School District elections.

Do not sign this petition unless you have read or have had read to you the proposed recall measure in its entirety and understand its meaning.

Petition to recall Kathy Gebhardt from the office of Boulder Valley School Board.

### Section 1-12-108, C.R.S.

General statement of grounds for recall:

We seek a recall of Kathy Gebhardt from the Boulder Valley School Board for ignoring the concerns of the community on issues that directly and negatively affect the physical and mental health of students. Ms. Gebhardt has:

1) consistently ignored dissenting opinions before making important decisions impacting staff and students;

2) provided no meaningful oversight of unelected health officials who have presented biased, misleading and false information at board meetings;

3) unquestioningly accepted the aforementioned officials' advice while ignoring professional, credentialed, and well-informed constituents;

4) demonstrated a callous disregard for students' physical and mental health by mandating masks indefinitely and without solid grounding in science for all students as young as age 2;

5) endangered the health of students by refusing to acknowledge legitimate medical exemptions approved by medical professionals;

6) aggressively promoted unlicensed Emergency Use Authorization COVID vaccines for students, including on school grounds, despite the controversial risk: benefit ratio of these products for children;

7) neglected to address a variety of student health and safety grievances raised by constituents throughout the district;

8) purposely avoided accountability by excluding parents from in-person participation at school board meetings.

The following three people comprise the committee designated to represent the signers in all matters affecting the petition:

Name: Dr. Michael Gaeta Margaret Arnett Athena Mills Address: 3685 Roundtree Court, Boulder, CO 80304 4670 White Rock Circle, #9, Boulder, CO 80301 5788 Knoll Crest Court, Boulder, CO 80301

**Incumbent statement:** I reject this recall effort as a potential threat to public health, a distraction for our community, and a waste of Boulder Valley School District (BVSD) monetary resources of at least \$668,000.

In-person learning has been our top priority during this pandemic. Our board has been working hard to ensure that our students continue receiving a top-notch education, that we minimize the number of school and class closures, and that we maintain high standards of safety and health.

The BVSD Board recognizes Boulder County Public Health's statutory responsibility to protect the health of our community and BVSD has complied with all health orders accordingly. We understand that as a part of a layered approach, masks, vaccines, testing, and high-quality ventilation are the most effective tools in preventing the spread of the COVID-19 virus.

BVSD's mask exemption process addresses the legitimate medical needs of individual students and employees while maintaining broad community protections.

Public engagement is a core value of the BVSD board. Grievances brought to the district are heard and considered. We have engaged with our community regularly by email, during phone, Zoom, and in-person meetings, with public comment during every regular board meeting, and during school visits and other public engagement activities.

Amidst the ever-changing pandemic landscape the BVSD board has been immediately responsive to changing conditions, and has created innovative and flexible education programs to meet the needs of our families.

This recall effort, if successful in gaining enough signatures, will cost BVSD and our taxpayers over \$668,000. The money spent on this recall will be gone from our budget forever and cannot be recovered.

The waste, distraction, and public health threat presented by this recall petition cannot be undone, and we reject this recall effort as counter to the needs of our school district and community.

Cost estimate of conducting the recall election:

<b>Boulder County:</b>	\$ 524,683
Gilpin County:	\$ 18,450
<b>Broomfield County:</b>	\$ 108,282 to 125,000
Total:	\$ 651,415 to 668,113

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	Signature	Residence Address (Street & Number)	County	
1	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
2	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
3	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
4	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
5	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
6	Printed Name	City/Town	Date of Signing	
	Signature Residence Address (Street & Number)		County	
7	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
8	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
9	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
10	Printed Name	City/Town	Date of Signing	
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12	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
13	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
14	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
15	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
16	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
17	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
18	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
19	Printed Name	City/Town	Date of Signing	
	Signature	Residence Address (Street & Number)	County	
20	Printed Name	City/Town	Date of Signing	
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### **CIRCULATOR AFFIDAVIT**

I do solemnly affirm under penalty of perjury that:

- I have read and understand the laws governing the circulation of recall petitions;
- I was a citizen of the United States and at least 18 years of age at the time this section of the petition was circulated;
- I circulated this section of the petition;
- Each signature on this petition was affixed in my presence;
- Each signature on this petition is the signature of the person whose name it purports to be;
- To the best of my knowledge, each of the persons signing this petition section was, at the time of signing, eligible to sign this recall petition;
- I have not paid or will not in the future pay and I believe that no other person has paid or will pay, directly or indirectly, any money or other thing of value to any signer for the purpose of inducing or causing such signer to affix his or her signature to the petition;
- I understand that I can be prosecuted for violating the laws governing the circulation of petitions;
- I understand that failing to make myself available to be deposed and to provide testimony in the event of a protest shall invalidate the petition section if it is challenged on the grounds of circulator fraud.

Circulator Name (please print)					
Last Name	First Name				
Permanent Residence Address (or location	if homeless)				
Street name and number (no P.O. Boxes)	City/Town		County	State	Zip Code
Sign and Date in the Presence of a Notar	V				
	5				
Signature of Circulator		Date of Signing			
A NOTARY PUBLIC MUST COMPLE	TE THE FOLLOWING S	ECTION:			
STATE OF COLORADO					
COUNTY OF					
Subscribed and affirmed before me this	day of	,20 by			
Subscribed and affirmed before me this	Month	Year	Printed name of	Circulator above	_
Signature (and Title) of Notary / Official Admin	istoring Osth				
Signature (and Thie) of Notary / Official Admin					
My Commission Expires:					
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