CERTIFICATION FORM - Directive 2016-34

Petition Filing: September 12, 2016
Supplementary Part-Petitions Proposing an Initiated Statute (Ohio Drug Price Relief Act)
FILED-POST-GENERAL ASSEMBLY PETITION

On behalf of the _____ County Board of Elections, I hereby certify that the numbers of valid and invalid signatures on the part-petitions for the proposed addition to the Ohio Revised Code named above are as follows:

1. Number of **valid** part-petitions	
2. Number of **valid** *signatures* on **valid** part-petitions	
3. Number of **invalid** *signatures* on **valid** part-petitions	
4. Number of **invalid** *part-petitions*	
5. Number of signatures on **invalid** *part-petitions*	
6. **Total** number of ***part-petitions*** received (valid & invalid)	0
7. **Total** number of ***signatures*** on part-petitions (valid & invalid)	0

Director's Signature: _____ Date: _____

Click on the submit button below to send your data electronically. This signed certification form must be received by Emily Bright via email at Ebright@ohiosecretaryofstate.gov no later than 12:00 noon on Thursday, September 29, 2016.

Please keep a copy of your completed Certification Form for your files.

Almost Done!

Name _____ Phone _____
Enter (111) 222-3333 as 1112223333

E Mail _____
Enter a valid email address e.g. name@somewhere.com