

REPEAL OF LEVY (GS § 15-473)

WE, THE UNDERSIGNED QUALIFIED REGISTERED VOTERS OF _____ COUNTY, NORTH CAROLINA, DO HEREBY PETITION THE _____ COUNTY GOVERNMENT FOR REPEAL OF LEVY OF A _____ SALES AND USE TAX.

PURSUANT TO CHAPTER 163 OF THE GENERAL STATUTE PROVIDING FRAUDULENT OR FALSE INFORMATION, OR SIGNING THE NAME OF ANOTHER PERSON TO THIS PETITION IS A CLASS I FELONY.

BOE ONLY	Line No.	Print your name (Must be printed legibly)	Residential street address	ZIP code	Birth date (MM/DD/YYYY)	Signature
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SUBMIT COMPLETED FORMS TO THE OFFICE OF (COUNTY) BOARD OF ELECTIONS.

Board of Elections use only

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Batch No _____

Date received ___/___/____