

# Instructions for Recall Petitions

DATE FILED: November 16, 2023 10:35 AM  
FILING ID: D7E66C57225C3  
CASE NUMBER: 1983CV105

## FOR PETITION SIGNORS

1. **BEFORE YOU SIGN**
  - A. Read the warning at the top of the page.
  - B. Make sure you are an eligible elector of the Heather Gardens Metropolitan 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. Use your own signature
  - B. Clearly print your legal name
  - C. Completely fill out the signature block. Do not use ditto marks.
  - D. Use black or blue ink.
  - E. List your residence address (including street name and number) where you are registered to vote. Do not use a post office box.
  - F. Place today's date under "Date of Signing."
  - G. 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.
4. **AFTER COLLECTING SIGNATURES**
  - 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.

**RECALL PETITION**

**WARNING: IT IS AGAINST THE LAW:**

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>Do not sign this petition unless you are an eligible elector. To be an eligible elector, you must be registered to vote in Colorado and be either a resident of Heather Gardens Metropolitan District or be the owner or spouse or civil union partner of an owner of taxable real or personal property in the Heather Gardens Metropolitan District as described in section 32-1-103(5) of the Colorado Revised Statutes.  
>Do not sign this petition unless you have read or have had read to you the proposed measure in its entirety and understand its meaning.

**PETITION TO RECALL CRAIG BALDWIN FROM THE OFFICE OF DIRECTOR OF THE HEATHER GARDENS METROPOLITAN DISTRICT**

**PETITION TEXT**

Craig Baldwin, in his role as a director of Heather Gardens Metropolitan District, in conjunction with three other HGMD directors, has created a toxic and hostile work environment that has resulted in the resignation of the Heather Gardens Chief Executive Officer, the Chief Financial Officer, the Clubhouse Manager, the Security chief and the Maintenance Manager. He has circulated to inappropriate recipients many "blind-copy" emails, particularly from the other three directors, containing critical and disparaging comments about various employees. This behavior threatens the peaceful work environment of Heather Gardens and the best interests of owners and residents.

**COMMITTEE MEMBERS**

John Harvey, 14102 East Linvale Place, #401, Aurora, CO 80014  
Allen Lindeman, 14287 E. Marina Dr., Aurora, CO 80014  
Bonnie Fleming, 13961 E. Marina Drive, #613, Aurora, Co 80014

I am an eligible elector in the political subdivision mentioned in this petition, as shown on the registration books of the county clerk and recorder. I have not signed any other recall petition to recall the named person for the named office. I hereby demand an election of a successor to the elected officer in this Recall Petition.

*A signature line consists of two lines, both of which must be fully completed by the signer unless physically unable.*

|   |              |                                     |                 |
|---|--------------|-------------------------------------|-----------------|
| 1 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
| 2 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
| 3 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
| 4 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
| 5 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
| 6 | Signature    | Residence Address (Number & Street) | County          |
|   | Printed Name | City/Town                           | Date of Signing |
|   | Signature    | Residence Address (Street & Number) | County          |

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|    | Printed Name | City/Town                           | Date of Signing |
| 11 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 12 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 13 | Signature    | Residence Address (Street & Number) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
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|    | Printed Name | City/Town                           | Date of Signing |
| 15 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
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| 20 | Signature    | Residence Address (Street & Number) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 21 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 22 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 23 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 24 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
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|    | Printed Name | City/Town                           | Date of Signing |
| 30 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 31 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 32 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 33 | Signature    | Residence Address (Number & Street) | County          |
|    | Printed Name | City/Town                           | Date of Signing |
| 34 | Signature    | Residence Address (Street & Number) | County          |
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|    | Printed Name | City/Town                           | Date of Signing |
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AFFIDAVIT OF CIRCULATOR

I, \_\_\_\_\_ (print name), swear or affirm under penalty or perjury that I reside at:

(Address) \_\_\_\_\_, (City) \_\_\_\_\_, CO, (Zip Code) \_\_\_\_\_, and that:

- I am eighteen (18) years of age or older;
- I circulated the attached petition;
- I made no misrepresentation of the purpose of the petition to any signer of the petition;
- Each signature on the petition was affixed in my presence;
- Each signature on the petition is the signature of the person whose name it purports to be;
- To the best of my knowledge and belief each person signing the petition was at the time of signing an eligible elector of the Heather Gardens Metropolitan District;
- I neither have paid nor shall pay, and I believe that no other person has paid or shall pay, directly or indirectly, any money or other thing of value to any signer for the purpose of inducing or causing such signer to sign such petition.

\_\_\_\_\_  
Signature of Circulator

\_\_\_\_\_  
Date of Signing

STATE OF COLORADO )

COUNTY OF \_\_\_\_\_ )

Subscribed and sworn before me, a notary public in and for the State of Colorado, this \_\_\_\_ day of \_\_\_\_\_, 2023 by \_\_\_\_\_.

Signature of Notary: \_\_\_\_\_

My commission expires: \_\_\_\_\_

(SEAL)