

PETITION TO REPEAL THE MOTION APPROVING AN INTERGOVERNMENTAL AGREEMENT BETWEEN BULLOCH COUNTY AND BRYAN COUNTY TO PROVIDE WATER AND SEWER SERVICES

WHEREAS, the Bulloch County, Georgia Board of Commissioners passed a “Motion to Approve an Intergovernmental Agreement between Bulloch County and Bryan County to Provide Water and Sewer Services” on June 27, 2024.

NOW, THEREFORE, the undersigned electors, pursuant to Ga. Const. Art. IX, § 2, ¶ 1(b)(2), hereby petition the Bulloch County Probate Court to call for an election by the registered electors of Bulloch County to approve or reject the following question:

Shall the Motion passed by the Bulloch County, Georgia Board of Commissioners approving an Intergovernmental Agreement between Bulloch County and Bryan County to Provide Water and Sewer Services be repealed?

IN WITNESS WHEREOF, the undersigned swear that they (1) are residents of the County of Bulloch, Georgia; (2) are electors registered to vote in Bulloch County in the last general election; and (3) have signed this Petition within the County of Bulloch:

PERSON 1 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 1 Signature		Date Signed	

PERSON 2 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 2 Signature		Date Signed	

PERSON 3 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 3 Signature		Date Signed	

PERSON 4 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 4 Signature		Date Signed	

**** IMPORTANT: VERIFICATION OF SIGNATURES ****

IN WITNESS WHEREOF, the undersigned swears that on the _____ day(s) of _____, 2025, I, a registered elector in the County of Bulloch, Georgia, have collected these signature(s) for this Petition within the County of Bulloch, Georgia:

Witness Full Name _____ Birthdate _____

Physical Address
(NOT PO BOX) _____

Signature _____

PETITION TO REPEAL A MOTION APPROVING A MEMORANDUM OF UNDERSTANDING FOR A WELL MITIGATION PROGRAM BETWEEN BULLOCH COUNTY AND BRYAN COUNTY

WHEREAS, the Bulloch County, Georgia Board of Commissioners passed a “Motion to Approve a Memorandum of Understanding for a Well Mitigation Program between Bulloch County and Bryan County” on June 27, 2024.

NOW, THEREFORE, the undersigned electors, pursuant to Ga. Const. Art. IX, § 2, ¶ 1(b)(2), hereby petition the Bulloch County Probate Court to call for an election by the registered electors of Bulloch County to approve or reject the following question:

Shall the Motion passed by the Bulloch County, Georgia Board of Commissioners approving a Memorandum of Understanding for a Well Mitigation Program between Bulloch County and Bryan County be repealed?

IN WITNESS WHEREOF, the undersigned swear that they (1) are residents of the County of Bulloch, Georgia; (2) are electors registered to vote in Bulloch County in the last general election; and (3) have signed this Petition within the County of Bulloch:

PERSON 1 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 1 Signature		Date Signed	

PERSON 2 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 2 Signature		Date Signed	

PERSON 3 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 3 Signature		Date Signed	

PERSON 4 Legal Printed Name			
Physical Address (NOT PO BOX)		Birthdate	
PERSON 4 Signature		Date Signed	

**** IMPORTANT: VERIFICATION OF SIGNATURES ****

IN WITNESS WHEREOF, the undersigned swears that on the _____ day(s) of _____, 2025, I, a registered elector in the County of Bulloch, Georgia, have collected these signature(s) for this Petition within the County of Bulloch, Georgia:

Witness Full Name _____ Birthdate _____

Physical Address
(NOT PO BOX) _____

Signature _____



Bulloch Action Coalition

Taking Bulloch *BAC*

PO BOX 1300, STATESBORO, GA 30459

BULLOCHACTION.COM

FACEBOOK.COM/BULLOCHACTION

Contact Information

By providing my contact information, I give permission for a representative of Bulloch Action Coalition to contact me.

PERSON 1 Legal Printed Name		
Birthdate		<input type="checkbox"/> I can help!
Phone Number		<input type="checkbox"/> I will donate!
Email address		

PERSON 2 Legal Printed Name		
Birthdate		<input type="checkbox"/> I can help!
Phone Number		<input type="checkbox"/> I will donate!
Email address		

PERSON 3 Legal Printed Name		
Birthdate		<input type="checkbox"/> I can help!
Phone Number		<input type="checkbox"/> I will donate!
Email address		

PERSON 4 Legal Printed Name		
Birthdate		<input type="checkbox"/> I can help!
Phone Number		<input type="checkbox"/> I will donate!
Email address		

Witness Legal Printed Name		
Birthdate		<input type="checkbox"/> I can help!
Phone Number		<input type="checkbox"/> I will donate!
Email address		