SIESTA KEY INCORPORATION PETITION

I, (print name as it appears on your voter information ca		lersigned, a property owner
in said state and county, petition in support of th	e Incorporation of	f Siesta Key.
Date of Birth (MM/DD/YY)	Siesta Key Address of ownership	
City	State	Zip Code
Signature of Property Owner		d (MM/DD/YY) leted by Voter]

Petitioners must be property owners on Siesta Key

Petitions can be dropped off at either DAVIDSON'S DRUGS location or mailed to:

Save Siesta Key, Inc P.O. Box 35214 Sarasota, 34242

