

# Term Limit Proposal

## Term Limits for the Harford County Council – Petition for Local Referendum

### DESCRIPTION:

Proposed Charter Amendment to Article II, Legislative Branch, of the Harford County Charter, as amended, by repealing and re-enacting, with amendments, Section 206, Term of Council Members; would provide for term limits of 2 full consecutive terms for County Council members, excepting for then serving 2 consecutive terms as Council President. The amendment also provides for term limits of 2 full consecutive terms as Council President. And Be It Further Enacted that before this Act becomes effective, it shall be submitted to a Referendum of the legally qualified voters of Harford County in accordance with Section 905 of the Charter of Harford County, Maryland, at the General Election to be held in November 2024.

### Article II. Legislative Branch

**Section 206. Term of Council Members.** A Council member shall serve for a term beginning at noon on the first Monday in December next following election, and ending noon on the first Monday in December in the fourth year thereafter. NO PERSON ELECTED OR APPOINTED AS A MEMBER OF THE COUNTY COUNCIL SHALL BE ELIGIBLE FOR SUCCESSION IN THE OFFICE OF COUNCIL MEMBER AFTER SERVING IN SUCH OFFICE FOR TWO CONSECUTIVE FULL FOUR-YEAR TERMS. A MEMBER OF THE COUNTY COUNCIL, HOWEVER, WHO WAS NOT THE COUNCIL PRESIDENT IS NOT PRECLUDED FROM BEING ELECTED OR APPOINTED AS THE COUNCIL PRESIDENT AFTER HAVING SERVED TWO CONSECUTIVE FULL FOUR-YEAR TERMS AS A COUNCIL MEMBER, BUT MAY ONLY SERVE TWO CONSECUTIVE FULL FOUR-YEAR TERMS AS COUNCIL PRESIDENT. IN DETERMINING ELIGIBILITY PURSUANT TO THIS SECTION, NO TERM OR PART OF A TERM SERVED PRIOR TO THE ELECTION ON NOVEMBER 3, 2026, SHALL BE USED IN CALCULATING THE LIMITATION ON NUMBER OF TERMS A COUNCIL MEMBER MAY SERVE.

## State of Maryland - Charter Amendment Petition

We, the undersigned voters of \_\_\_\_\_ County or  (check for Baltimore City), hereby petition to have this amendment of the County or City Charter submitted to a vote of the registered voters of the County or Baltimore City, for approval or rejection at the next general election.

If the full text of the proposal does not appear on the back of this signature page, a fair and accurate summary of the substantive provisions of the proposal must appear on the back, and the full text of the proposal must be immediately available from the petition circulator.

**NOTICE TO SIGNERS: Sign and print your name (1) as it appears on the voter registration list, OR (2) your surname of registration AND at least one full given name AND the initial of any other names.** Please print or type all information other than your signature. Post Office Box addresses are not generally accepted as valid. By signing this petition, you agree that the aforementioned charter amendment proposal should be placed on the ballot as a question at the next general election and that, to the best of your knowledge, you are registered to vote in Maryland and are eligible to have your signature counted for this petition.

SBE 6-201-5C (Rev 3-2012)

**Please Note:** The information you provide on this petition is public information and may be used to change your voter registration address.

<b>1</b>	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
<b>2</b>	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
<b>3</b>	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
<b>4</b>	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		
<b>5</b>	Print Name:	First Name	Middle Name	Last Name	Birth Date:	Month	Date	Year
	Signature:				Date of Signature:	Month	Date	Year
	Maryland Residence Address:	Street Number	Street Name	Apt. No.	City or Town	Zip		

Individual Circulator's printed or typed name \_\_\_\_\_

Residence Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (including area code) \_\_\_\_\_

**Circulator's Affidavit** Under penalties of perjury, I swear (or affirm) that: (a) I was at least 18 years old when each signature was obtained; (b) the information given to the left identifying me is true and correct; (c) I personally observed each signer as he or she signed this page; and (d) to the best of my knowledge and belief: (i) all signatures on this page are genuine; and (ii) all signers are registered voters of Maryland. (Sign and Date when signature collection is completed)

Circulator's Signature \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_