



## PETITION FORM

To: Chief Executive Officer  
City of Cockburn  
9 Coleville Crescent  
SPEARWOOD WA 6163

PO Box 1215  
BIBRA LAKE WA DC 6965

We, the undersigned electors of the City of Cockburn request *(clearly define the purpose)*

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for the following reasons *(provide summary of reasons supporting requests)*

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As the initiator of this petition, my name is .....

For further information I can be contacted via email .....

or by telephone .....

