# EXHIBIT 1

To the Jackson County Clerk, Jackson County Board of Election Commissioners, and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned, registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of FRANK Withirs Joz (name of the individual being recalled) the COUNTY (office of the individual being recalled) and that the following recalled to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7, 8 9 and 10.

As a signer of this Recall Petition, I acknowledge the following requirements. I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

	Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
1. K	12/13/24	MARVA GARAGE		+88245Wgis & blueSFRIVES MO	64069
2 2	12/13/24	Russell Sared Ir		1055 Hand Dr Sibler MG	16 4088
3. 12	12/13/1	1 1 in No. Ton		OLDS TO FINDA OLD ODE OX PL GUE SO MOS.	124015
4. R	112/13/24	Parge Ryan		2211 No Hespergood Dr. Swann Vatterin	11 64020
5. K	12/13/24	Hammin Callon		627 NE5th St. Bille Springs MA	109014
6. NP	1213 24	Robert Smith		811 NV 17th St. Blue Spring 5, this	60+64015
7. 2	12/83/24	Froy Phillips		2305 Now Krusmyton Ch Blue Surings, N.	064015
8. 20A	12/13/24	Beishanne Jones		WI SW windsor Ct Blue Spring Mo, Maggot	
9.	12/13/24	Stew leighty C		403 NW (charian RO BS mo	11014
10.	12.1324	Andina Johnson		2105 NWHONORI REMO 64015 -	-7 lago(5

CIRCULATOR'S AFFIDAVIT

State Of Missouri, County of Jackson. I Delieve that each person has stated his or her name, registered voting address including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

Signature of Circulator

832 & LA PGIMIT Street Address of Circulator

GOID CHAYON AT 85 HK City, State of Zip Code

4930 W 1377H

1 FENSOD KS 68224

NOTARY PUBLIC, STATE OF MISSOURI Jackson County

Signature of Notary

IN THE STATE OF MISSOURI, COUNTY OF JACKSON (Page #

#### RECALL PETITION

To the Jackson County Clerk, Jackson County Board of Election Commissioners; and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned, registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of (name of the individual being recalled) the (office of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7, 8. 9 and 10.

As a signer of this Recall Petition, I acknowledge the following requirements: I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

	Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
1. K	12/4/29	- Shellie Frailey		1930/ E. 5 pars, Judep. MW	Le 4003
2. 2	12/1/10	Isai Nickl /		13916 5W Kegatha D. LS MD	64052
3.	12/94	Denis GREGERY		2341 SW FRATER ROSE RO MP.	6082
4.	12/5/24	Danielle Shirten		1153 Tuler En, Errenwood, MO	44034
5. WS	1218124	Saire 46		4212 the GLASTIC CON IS MO GOES	64082
S.		in equelye to for		The is the second	2 Z
RDA	12/11/27	\$5 Vincent Dungan		123X & 3184 85 KC +0 19 1	64133
i. P	12/24	lorrie (Indel)		24011 F ALLOM 1 KI IN , , 1010 1:40	51x 64033
-	16/12/2	+ DO ONNOA		568 160 2 was 616 MO	0417 79
0. P	12-12-34	White MELAN Ahar		1863 NE Pertanna cinta BS	624014

# CIRCULATOR'S AFFIDAVIT

State Of Missouri, County of Jackson. 1 PLYNV Jun	being first duly swom, say that the persons who signed this Recall Petition, did s	so in my presence. I believe that each pe	erson has stated his	or her name, registered v	voting
	that each signer is a registered voter of the state of Missour and Jackson County. Fi				
STATEMENTS MADE BY ME ARE TRUE AND C	PRRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF	OR PLED GUILTY TO ANY OFFENSE I	<b>NVOLVING FORGE</b>	RY.	
A1 00	TBROWN	H -	^	~	

ANNY	1/-1/
Signature of dircu	lator
Alvery	inter

5604ND 55 Street'Address of Circulator

City. State of Zip Code

TBROWN NOTARY PUBLIC, STATE OF MISSOURSubscribed and swom on this Jackson County

Commission # 15633353

ST 830 W 137 TH #200 KS 6G224 NOTARY PUBLIC, STATE OF MISSOURI Jackson County

Commission # 1563-3353 A drass-of-Nota-Fapins F broary 25, 2027

My Commission Expired Februs 25, 2027

Printed Name of Circulator

Signature of Notary

To the Jackson County Clerk, Jackson County Board of Election Commissioners, and the Kansas City Board of Election Commissioners.

Be it enacted by the people of Jackson County, we, the undersigned registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of (name of the individual being recalled) the (c) (office of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7 8. 9 and 10

As a signer of this Recall Petition, I acknowledge the following requirements: I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
12/11/24	Donovan McClondon		1405 SIN 20th Blue Source MO	64015
R / 12/1/20	ALLCHAEL U FLLETON		216 SE COLUTRY LU LES SULINITA	64063
12/12/24	Nonna Williams		3800 SE villey torge D. Blue Springs, 1116	69014
R V 12/12/2	GERALO SEFFREY LOWES		112 SHATAFE ST SIBLEY 100 6	64088
12/2/24	- Patricia Middaugh		36225 Axial DG MA 64075	64075
7	Sandra Hattield		1313 4 W 550 Dt 64 04 9 DD MD	1015
12/12/24	Darbara sois.		7405 E. 133 St Grandview, MD 64030	64030
2 / 12/12/2	112-le Font		4307 5. 471 te sens -+	107-B
R 1/2/2/24	Jean Baller		16430 ESTE 0-10 , Indige 146	6406
- 117112h	1 Jordan Smith		104 SEHANAND BS MO	ELC 16/

CIRCULATOR'S AFFIDAVIT

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State Of Missouri, County of Jackson.	Grace Sma being first duly swom, say it	nat the persons who signed this Recall P	etition, did so in my presence.	I believe that each person has sta	ted his or her name, registered voting
address including city, town or village	correctly and that each signer is a registered vi	oter of the state of Missouri and welcome	Commission ERMORE, I	HEREBY SWEAR OR AFFIRM UP	IDER PENALTY OF PERJURY THAT ALL
STATEMENTS MADE BY ME ARE TH	RUE AND CORRECT AND THAT I HAVE NE	VER BEEN GONVILLED OR FOR DIO	UILTY OF OR P ED GUILTY	TO ANY OFFENSE INVOLVING	FORGERY.

NOTARY PUBLIC, STATE OF MISSOURI Commission #1563.31 bs a bed in a wirm on this

TBROWN

Signature of Notary

NOTARY PUBLIC. STATE OF MISSOURI

Jackson County

To the Jackson County Clerk, Jackson County Board of Election Commissioners, and the Kansas City Board of Election Commissioners:

Be It enacted by the people of Jackson County, we the undersigned, registered voters of the state of Missouri and Jackson County Missouri, respectfully demand the recall of FRANK LINITE Jan (name of the individual being recalled) the CALLIA Executive (office of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7 8, 9 and 10

As a signer of this Recall Petition, Lacknowledge the following requirements. Lan a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voting address and the name of the city, town or village in which I live are correctly written after my name. do so in the presence of the individual circulating the petition

Date	Printed Name	, / Signature	Registered Voting Address (must Include house number, street name and city, town or village	Zip Code
- 12/13/R	KISWI RYVIT		18019 W/ W/65 Rd hove lack	(24070)
- 12/13/21	Amee Young		1501 Sw8+ Par Lee's Summet	14081
2 12/13/24	Cheryl Bearden		13310 Pratt Rd. Lee's Summent	64086
- 112/13/24/1	Morgan Wilson		1016 SE STATERFACE Lees Summit MG	64063
112-14-24	Bonnie Hammack		312 SW Chathen & D. Mo	64052
- 112/4/21	ince Band Dresnahan		1721 NE Westland Share G. LS	670960
14/14/28	fan a Marka		7 of ju winkinger Dr leig funt	60071
12-14-24 /	Morgan Dean Allen		22:3 Su Walden Place Le Summet	64081
- 112-14-211	DIDGIN THOMPSON		3717 Ne Stanton St Les Summit	64064
12-14-24 F	Elizabeth Howard		15/2 SE Ridge port Cir LSMU	64081
		6 6 1	5 V	

CIRCULATOR'S AFFIDAVIT

being first duly swom, say that the persons who signed this Recall Petition, did so in my presence. I believe that each person has stated his or her name, registered voting address including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

LEAHOOD KS 68224

Signature of Notary

IT BROWN NOTARY PUBLIC, STATE OF MISSOURI

Inckson County

Commission # 15633555

Address of My Commission Expirer February 25, 202

To the Jackson County Clerk, Jackson County Board of Election Commissioners, and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of (name of the individual being recalled) the (name of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7. 8, 9 and 10.

As a signer of this Recall Petition, I acknowledge the following requirements: I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
1. KC 12/18/24	EVERY VAINELL		9116 8 31 T Front K.C. MG GH	164129
2. KC 12/86/20	man Jones		3007 belland the Keemo 6:	54179
3. R 12/11/29	Ronald L. Garrette		11304 E. 71st Dr. Routown MD	64/33
1. KC /21/34	maista trestor		Gazil faire name 12 cli & a.	114689
5. R 12/11/21	MARIA Leathers		12717 9 48ta ST 148000 IN	64055
B. R 12/11/24	Jusin Cravens		1143/ Nortedge Ave Spor Crek HO 64059	64054
1. KC/2/1/24	Dwaine Jones		2206 Fin 4015 KC MO	104130
KC/12/1/24	Dornell Williams		5236 Fast 28th StAP1 1 W	164128
NR-KC/2/11/24	Kathingin Bruce		4510 Hedges tole KCMO LH133	44133
ONR-XC/2/11/25	Quatur Clary		1466 E Tow of Ainte Mo 44 173	641.73

CIRCULATOR'S AFFIDAVIT

ate Of Missouri, County of Jackson. I County of Jackson. I County of Jackson. I Delieve that each person has stated his or her name, registered voting idness including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL FATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

anature of Circulate

4630 W 137 TH

LEAVOOD KS 66224

I BROWN NOTARY PUBLIC, STATE OF MISSOURI

Commission #15633353

My Commission Expires February 25 2027

To the Jackson County Clerk, Jackson County Board of Election Commissioners, and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned, registered voters of the state of Missouri and Jackson County. Missouri, respectfully demand the recall of Faculty Library (name of the individual being recalled) the (name of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7, 8, 9 and 10.

As a signer of this Recall Petition, I acknowledge the following requirements: I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

	Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
RDA	124/24	Mille Looping		24826 & TIOMAN Rd. Ind. MO	64050
R	14/27	Stippane lis north		1808 SW Reyster BSMO	64014
R	12/11/24	Tarmes Roop		- 8604 S. Shink Rt. G. V mo.	64029
R	2/14/24	Phil last.		13421 = 1246 Tour N Indeed MO	64050
KC	12-14-74	Warres Stickand		4905 Raymond for KCMD	64136
KC	12/14/24	Rome Huber		198W 1254 fer FCNO	PA142
R.	12.14-24	Roshael Markbu		103. SW 15th St. Blue Springs, MO.	64063
R	12-14-24	Linda Stenater		12000 E. Levington Aux Suran Creek	104054
R	12-14-2	(Cayporianna) Irwin		14104 NW Briarwood Dr. Blue Springs	164015
R	17-14/4	Deminse Wolfenes		18 A9 NW BOCKSLINE Dr. Blee Spring	69015

CIRCULATOR'S AFFIDAVIT

State Of Missouri, County of Jackson. I Defleve that each person has stated his or her name, registered voting address including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

Signature of Circulator

DeMarche Mosley

3737 Crownpoint Aue Street Address of Circulator

Omana, NE G811

Subscribed and sworn on this

4830 W 1377H ST

LEARDOD KS 68224

Signature of Notary

NOTARY PUBLIC, STATE OF MISSOURI

Juckson County
Commission # 15633353

dicress chilatasia Expires February 25, 2027

To the Jackson County Clerk, Jackson County Board of Election Commissioners; and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned, registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of FROME White Day (name of the individual being recalled) the CONNE (office of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7. 8, 9 and 10.

As a signer of this Recall Petition, I acknowledge the following requirements: I am a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
1. OK 12-13-24	PENNIY SARTAIN		1706 N JENNINGS RD TANDERM	D. 64058
2 1 12-1724	Craiz Bunca		7016 5 Stillhuse Rd Dok Gove	64075
3. 2 12-1321	linea theriso		201 SE Chicas J. Burner Me	15014
4. ( 12/13/24 4	Petra Del eon		27900 E. Argo Rd Ind Mo	104057
5. L 13/3/41	DAN BARTUST		764 92 29 5 B. S. MG	624 MG
6 FMB 1213121	Chiqe, Atkinson		305 NESWIMEN School RD BS MO	64019
F 131 3121	MIKE WILSON		1105 BARLLEY BOOKNOW MO	64016
8.004 12/1,3/14	copy Keynolds		LOS SE Conserbrial LN 1970	(24014 pm
10 11 1 (12)	11/15/KIE HAUSON		1012 got lane no gulleton	640145
1 KU ( +/13)	4 Alec iee		2900 Date St #109 Kanses City, NO	64108

CIRCULATOR'S AFFIDAVIT

first duly swom, say that the persons who signed this Recall Petition, did so in my presence. I believe that each person has stated his or her name, registered voting address including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

10 W 137 TH

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NOTARY PUBLIC, STATE OF MISSOURI

lackson County

To the Jackson County Clerk, Jackson County Board of Election Commissioners; and the Kansas City Board of Election Commissioners:

Be it enacted by the people of Jackson County, we, the undersigned, registered voters of the state of Missouri and Jackson County, Missouri, respectfully demand the recall of FRANK White Joz (name of the individual being recalled) the (1) 11 12 (office of the individual being recalled) and that the following recall be submitted to the voters of Jackson County, Missouri for their approval or rejection, in accordance with the laws of the state of Missouri and the Jackson County, Missouri Constitutional Home Rule Charter, Article XIV Section 7. 8. 9 and 10.

As a signer of this Recall Petition, Lacknowledge the following requirements: Lam a registered voter in the State of Missouri and Jackson County Missouri. I have personally signed this petition and legibly printed date of signing on the petition, my name, my registered voting address and the name of the city, town or village in which I live are correctly written after my name. Every registered voter signing a petition must do so in the presence of the individual circulating the petition.

	Date	Printed Name	Signature	Registered Voting Address (must include house number, street name and city, town or village	Zip Code
· N	12/15/24	Steva M. Evos		904 NW Ceeler Creek Lane Lee Symonth MD	64081
Cass	12/15/24	Low Worker		1000 n. Ward Rd Edynore	64083
KC	12/15-24	Ronda Wade		1205 E. 108 MSt KCMB	44134
<u>B</u>	12/15/24	Nanzal Daniels		1600 SW 415+ St Lee's Swam,+	64082
KC	12/5/21	Steven War 1		10801 Ela An Kemo	64/34
R	12/15/2	(h) league Front		3817 Sulfa result L&MU	64082
D.	12/15/14	LNUS PARIN		808 NW retter LES suren	64081
B	12/15/24	Jacandine Bionda		1668 Su ver Orleans Les Summet	:4691
8	1211514	MILIGAN STATE		10405 Evans Stindevendence MG	64093
R	10/10/10/	Michael Dianes		2935 SW Hibotra & LS MW GAUES	(2408)

#### CIRCULATOR'S AFFIDAVIT

State Of Missouri, County of Jackson. I Defection, did so In my presence. I believe that each person has stated his or her name, registered voting address including city, town or village correctly and that each signer is a registered voter of the state of Missouri and Jackson County. FURTHERMORE, I HEREBY SWEAR OR AFFIRM UNDER PENALTY OF PERJURY THAT ALL STATEMENTS MADE BY ME ARE TRUE AND CORRECT AND THAT I HAVE NEVER BEEN CONVICTED OF, FOUND GUILTY OF OR PLED GUILTY TO ANY OFFENSE INVOLVING FORGERY.

NOTARY PUBLIC, STATE OF MISSOURI

Jackson Councy

Address of Mptomission Expires February 25, 2027

Signature of Notary