Ballot Title or Measure Title	County, City or District	Name:
A full and correct copy of the text of the petitic	on is included.	
Chief Petitioners Name, City, State		
Warning! It is against the law for you to sign and	other person's name under any circumstances, si	ign a petition more than one time or sign a
petition when you are not qualified to sign it.		
· - · · · · · · · · · · · · · · · · · ·	active Oregon voter, registered to vote in the co	
	sheet or requested someone else print it for you etition to be placed on the ballot as well as certify	
sheet or requested someone else print it for		y that you have personally printed this
2 Sign your name, as you did when you register	red to vote.	
3 Fill in the date, print your name and residence	e address. Only you may complete this informati	on.
	copy of this sheet or requested a separate perso	n print a copy so that I may sign it. I
request this petition be placed on the ballot for	approval or rejection by the voters.	
Signature	Date Signed mm/dd/yy	
Print Name	Residence Address street,	city, zip code
		Sheet Number
		Completed by chief petitioner