Petition Submission

Candidate, Voters' Pamphlet

rev. 12/24 OAR 165-010-0005, 165-016-0000

→ This form must b	e completed and filed wi	ith any submission of s	gnatures.			
Election Type			Year			
Primary	General	Special Election	2024	<u>2025</u>	<u>2026</u>	
Petition Informat	ion					
Petition ID/Candidate's Name						
Type of Filing			Number of Signatures Submitted			
Candidate Nomi	inating					
Votore' Ramphlet Candidate						
Voters' Pamphlet, Candidate						
☐ Voters' Pamphlet, Measure						
Candidate's Nom	inating/Voters' Pampl	hlet Filing				
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.						
Name		Contact Phone		Email Address		
		'				
Signature				Date Signed		
Measure Argument Filing						
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.						
Name		Contact Phone		Email Address		
Signature				Date Signed		

For office use only							
Submittal number	Number of signatures accepted						
l l							
Is the petition complete? Yes No	Will there be additional submittals? Yes No						