


# Electronic Signature Sheet | Local Recall

Petition ID \_\_\_\_\_

**SOME** circulators  **NO** circulators for this petition are being paid.

Petition for Recall of \_\_\_\_\_ Title of Public Officer \_\_\_\_\_ Chief Petitioner *Name, City, State* \_\_\_\_\_ Date Prospective Petition Filed \_\_\_\_\_

 The chief petitioner's reasons for demanding the recall of the above-named public officer are provided below in 200 words or less. Any factual information in the statement that is not a matter of opinion must be true.

**Warning!** It is against the law for you to sign another person's name under any circumstances, sign a petition more than one time or sign a petition when you are not qualified to sign it.

**Instructions** Only sign this petition if you are an active Oregon voter, registered to vote in the county, city or district where this petition is being circulated and you personally printed this sheet or requested someone else print it for you.

- 1 You must sign this sheet to request for the recall to be placed on the ballot as well as certify that you have personally printed this sheet or requested someone else print it for you.
- 2 Sign your name, as you did when you registered to vote.
- 3 Fill in the date, print your name and residence address. Only you may complete this information.

**Certification** I certify that I personally printed a copy of this sheet or requested a separate person 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