


# Candidate Signature Sheet | Individual Electors

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

SOME Circulators  No Circulators for this petition are being paid.


This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

 Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer.

County \_\_\_\_\_

Candidate Information	
Name	Office
Election	District or Position Number

To the Elections Official/Filing Officer, We the undersigned voters, as residents of the district, request the candidate's name be placed on the ballot at the election listed above for the office indicated.

 Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
1			
2			
3			
4			
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6			
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9			
10			

**Circulator Certification** This certification **must** be completed by the circulator and additional signatures **should not** be collected on this sheet once the certification has been signed and dated! I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

\_\_\_\_\_  
Circulator Signature

\_\_\_\_\_  
Date Signed mm/dd/yy

\_\_\_\_\_  
Sheet Number

Completed by  
Candidate

\_\_\_\_\_  
Printed Name of Circulator

\_\_\_\_\_  
Circulator's Address street, city, zip code