Petition for Special District Nomination Signa	ature Sheet Petition ID
This is a candidate nominating petition. Signers of this page must be active registered voters in the following county:	
Candidate's Name	District Name
Office	District, Position, Department or Zone Number if applicable
To the County Elections Official, We, the undersigned voters, request the candid be placed upon the appropriate ballot at the next regular district election following to	
Signature Date Signed mm/dd/yy Print Name	Residence or Mailing Address street, city, zip code
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County Elections Official Certification	
I hereby certify signatures on this petition are those of active registered	voters in
in County, Ore	
Signature of County Elections Official	Date Certified mm/dd/yy Sheet Number