Candidate Signature Sheet | Nonpartisan

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** (include city if applicable)

To the Elections Official/Filing Officer, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to 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				
7				
8				
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 _____

County Elections Officials provide a separate certification to attach to the petition.