

7/27/2020

Gerardo Padilla 266 5th St., Unit A Ashland OR 97520

A completed petition, with the required signature sheets properly certified by the county elections office has been received and is filed with the City Recorder's Office for City Council Position #3.

Please let me know if I can be of any further assistance during this upcoming election time.

Melissa Huhtala

City Recorder



Petition Submission

Candidate, Voters' Pamphlet

SEL 338

rev. 08/18 OAR 165-010-0005, 165-016-0000

State		County For both cour	ity and district petiti	ons.	
Election Type			Year		
Primary [General	Special Election	2018	2019	2020
Petition Information					
Petition ID/Candidate's	Name	Туре	Candidate N	ominating	
C2020-03C		LASSE -	☐ Voters' Pam	phlet, Candidate	oters' Pamphlet, Measure
Type of Filing			Number of Sig	gnatures Submitted	
Candidate Nominatir	g		54		
☐ Voters' Pamphlet, Ca	ndidate				
Voters' Pamphlet, M	easure				
Candidate's Nominati					
→ By signing this documen	t, I hereby state ti	hat all information on the for	m is true and correc	t to the best of my knowle	dge.
Name		Contact Phone		Email Address	
SERARDO PADILLA		415-913-8177		GERARDO.PAI	DILLA@OUTLOOK.COM
11	_			08-06-2020	
Signature					
May	ling				
Measure Argument Fi		nat all information on the for	m is true and correc	t to the best of my knowle	dge.
Measure Argument Fi		nat all information on the for Contact Phone	m is true and correc	t to the best of my knowled Email Address	dge.

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

County: JACKSON

Petition Processing Statistics Report Date: 8/10/2020 12:23:18 PM

User Name : Myers, Trisha

Number :C2020-03C Title :Gerardo Padilla, City of Ashland, Council #3

Petition Information

Petition Name: Gerardo Padilla, City of Ashland, Council #3

Petition Date: 07/27/2020

Date Filed: 07/27/2020

End Circulation Date: 08/03/2020

Minimum Signatures Required: 25

Accepted Of Minimum: (108.00%)

Total Signatures Processed: 54

	Processing Summary	Sample: All	
Total Accepted Signatures	: 27	(50%)	Of Those Processed
Total Rejected Signatures	: 27	(50%)	Of Those Processed
cepted Reason		Total	(% Rejected)

Valid Signature 27 (100%)

Rejected Reason	Total	(% Rejected)	
Not Registered	13	(48.1%)	
Out of District	12	(44.4%)	
Pending when signed	1	(3.7%)	
Inactive When Signed	1	(3.7%)	



July 27, 2020

Gerardo Padilla 266 5th Street, Unit A Ashland OR 97520

A prospective petition has been completed and filed with the City Recorder's Office for City Councilor Position #3.

Petition ID C2020-03C has been approved for circulation to obtain the required 25 signatures for this position. Deadline to submit petitions to the Election Officer is August 6, 2020.

Melissa Huhtala City Recorder

1) AluHal

CITY RECORDER 20 E Main Street Ashland, Oregon 97520 www.ashland.or.us Tel: 541-488-5307 Fax: 541-552-2059 TTY: 800-735-2900



Candidate Filing

Major Political Party or Nonpartisan

RECEIVED JUL 27 2020 MA

SEL 101

rev 01/20 ORS 249.031

Filing Dates			Candidate	Filing	Candidate \	Withdrawal
Primary Election May 19, 2020	First Day to Fi Last Day to Fil		September March 10,		March 13, 20	020
General Election November 3, 2020	First Day to Fi		June 3, 202 August 25,		August 28, 2	020
Filing Information						
This filling is an	Original		Amend	ment		
Office Information						
Filing for Office of:	Ashland C	City Council Sea	t 3			
District, Position or County:	Jackson Co	ounty. City of A	shland. City	Council Seat 3		
Party Affiliation:		Democratic P	arty	Republican Part	y 🛛 N	onpartisan
Incumbent Judge (for judicial c	andidates only):	Yes		☐ No	□ N	ondisclosure on file
Filing Method						
Fee						
Office United States President United States Vice President United States Senator United States Representative Statewide Offices State senator or Representative Circuit Court Judge	Filing Fee n/a n/a \$150 \$100 \$100 \$25 \$50		Office District Attor County Judg MSD Executi MSD Council County Offic City Office Justice of the	e ve Officer, MAD Director or e	\$25 \$50	ter or ordinance
Prospective Petition, in lieu	of filling fee		Some circul	lators may be paid	Yes	⊠ No
Candidate Information						
Name of Candidate						
First	MI	Last			Suffix	Title
Gerardo			Padilla			
How you would like your nam	e to appear on th	e ballot				
Gerardo Padilla						
Candidate Residence / Route	Address					
Street Address		City		State	Zip	County
266 5th St Unit A		Ashland		Or	97520	Jackson
Candidate Mailing Address an	d Contact Inform	ation Only one phon	e number and	an email is required.		
Street Address or PO Box		City		State	Zip	
266 5th St Unit A		Ashland		Or	97520	
Work Phone	Home Phone		Cell Phone		Fax	
			415-9	13-8177		
Email Address Gerardo.Padilla@outle	ook.com			f applicable		
Race and Ethnicity Optional						

occupation (present employment) if not employe	o, enter Not Employed .			
State of Oregon Human Services Specia	list 3			
Occupational Background (previous employmen	t) If no relevant experience,	, None or NA must I	be entered.	
the state of the control of the state of the				
	F. A LOUIS HARVE			
Educational Background (schools attended)	13			
Complete name of School	Last Grade completed	Diploma/Degre	e/Certificate	Course of Study
University of California Santa Barbara		BA		Political Science
Escuela de Negocios Europea de Barce	lona	MA	Masters in Ma	nagement and Team management
Escuela de Negocios Europea de Barce	lona	MBA	Masters is	n Business Administration
Educational Background (other) Attach a separate Statistical Analysis, Economics, Politics of Economic Developme Modern American Law, Politics of the Environment, Comparativ	nt, Third World Politics, Law in t			
Polar Community Street and Alexander	sheed) if a sale and a	N NA	and be entered	
Prior Governmental Experience (elected or appo Equality Works, NW. Participant Member. Equality Work inclusive, and effective manner through transformations	s, NW supports agencies and	organizations of all		
Office of Equity and Multicultural Services (OEMS	S). Participant Member			
Campaign Finance Information Not applicable	to candidates for federal of	fice.		
A candidate must file a Statement of Organization not later than the deadline for filing a nominating petition meet the criteria for an exemption. To meet the criteri and not expect to spend or receive more than \$750 du If you have an existing candidate committee you must	, declaration of candidacy, o ia, the candidate must serve ring the entire calendar year	or certificate of nom as their own treasu r (including in-kind o	ination, whichever erer, not have an contributions and	ver occurs first, unless they existing candidate committee, if personal funds).
includes changes to the election you are active in and See the Campaign Finance Manual for the procedural			ntaining a candid	late committee
	and legal requirements of e	staunstning artu man	icanning a candid	nate commutee.
Candidate Attestation				
By signing this document, I hereby state that: I will accept the nomination for the office indicate	d above:			
→ I will qualify for said office if elected;				
→ All information provided by me on this form is true → No circulators will be compensated based on the r			on a prospective	e petition
For Major Political Party Candidates				
→ if not nominated, I will not accept the nomination → I have been a member of said political party, subject				
mominating petition or declaration of candidacy (C				
Warning Supplying false information on this form may r (ORS 260.715). A person may only file for one the person has withdrawn from the first filing,	lucrative office or not more	than one precinct of	ommittee perso	
11 0				
Much-			07/02/045	0
Candidate Signature			07/22/202	U
Candidate Signature			Date	
For Office User Only Initials	Batch She	eet/CC Approval C	ode/ Receipt N	lumber
	2010, 911	or opposite		

occupation (present employment) if not employe	o, enter Not Employed .			
State of Oregon Human Services Specia	list 3			
Occupational Background (previous employmen	t) If no relevant experience,	, None or NA must I	be entered.	
t tratamination and analysis of the constitution of				
	F. A LOUIS HARVE			
Educational Background (schools attended)	13			
Complete name of School	Last Grade completed	Diploma/Degre	e/Certificate	Course of Study
University of California Santa Barbara		BA		Political Science
Escuela de Negocios Europea de Barce	lona	MA	Masters in Ma	nagement and Team management
Escuela de Negocios Europea de Barce	lona	MBA	Masters is	n Business Administration
Educational Background (other) Attach a separate Statistical Analysis, Economics, Politics of Economic Developme Modern American Law, Politics of the Environment, Comparativ	nt, Third World Politics, Law in t			
Polar Community Street and Alexander	sheed) if a sale and a	N NA	and be entered	
Prior Governmental Experience (elected or appo Equality Works, NW. Participant Member. Equality Work inclusive, and effective manner through transformations	s, NW supports agencies and	organizations of all		
Office of Equity and Multicultural Services (OEMS	S). Participant Member			
Campaign Finance Information Not applicable	to candidates for federal of	fice.		
A candidate must file a Statement of Organization not later than the deadline for filing a nominating petition meet the criteria for an exemption. To meet the criteri and not expect to spend or receive more than \$750 du If you have an existing candidate committee you must	, declaration of candidacy, o ia, the candidate must serve ring the entire calendar year	or certificate of nom as their own treasu r (including in-kind o	ination, whichever erer, not have an contributions and	ver occurs first, unless they existing candidate committee, if personal funds).
includes changes to the election you are active in and See the Campaign Finance Manual for the procedural			ntaining a candid	late committee
	and legal requirements of e	staunstning artu man	icanning a candid	nate commutee.
Candidate Attestation				
By signing this document, I hereby state that: I will accept the nomination for the office indicate	d above:			
→ I will qualify for said office if elected;				
→ All information provided by me on this form is true → No circulators will be compensated based on the r			on a prospective	e petition
For Major Political Party Candidates				
→ if not nominated, I will not accept the nomination → I have been a member of said political party, subject				
mominating petition or declaration of candidacy (C				
Warning Supplying false information on this form may r (ORS 260.715). A person may only file for one the person has withdrawn from the first filing,	lucrative office or not more	than one precinct of	ommittee perso	
11 0				
Much-			07/02/045	0
Candidate Signature			07/22/202	U
Candidate Signature			Date	
For Office User Only Initials	Batch She	eet/CC Approval C	ode/ Receipt N	lumber
	2010, 911	or opposite		

Candidate Signature Sheet Nonpartisan	partisan	Petition ID CZOZO-OSC
SOME Circulators No Circulators for This is a candidate nominating petition. Signers of Signatures must be verified by the appropriate count	SOME Circulators	County JACKSON
Candidate Information		
Name GERARDO PADILLA	Office ASHLAND CITY COUNCIL	UNCIL
Election GENERAL	District or Position Number (include city if applicable) ASHLAND CITY COUNCIL SEAT 3	de city if applicable)
To the Elections Official/Filing Officer, We the undersigned voters, Signature Signature Date Signed ma	Figures must initial any changes the circulator makes to their partial styles of the Signature Partial Signature Partial Signature Partial Signature Partial Signature Partial Signature Partial Signature Print Name Print Name OFFICE STATE NAME OFFICE STATE STATE OFFICE STATE STAT	Residence or Mailing Address street, city, zip gode TalentoR, 97540
The Menn	7-30-20 JAMES ROGER	18 N 4th St., Talent of 8340
No Vicker Crew	7/30/2020 VICKIE CRAK-	749 WILMER ST +18 KHITHIND OF BZ
3000	7/31/2020 Alexandra Cura	455 Humos 11 Valut on 9754
& The Muhair	7/71 /2020 Elso CHALLUS Rubilly	all birminor & 97520
100 000 O00		
Circulator Certification This certification must I hereby certify that I witnessed the signing of the significant (ORS 249.061). I also hereby certify that co	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.	n this sheet once the certification has been signed and dated! and I believe each person is a voter qualified to sign the for this petition.
Orculator Signature	Date Signed mm/dd/yy	Sheet Number Completed by
Sevardo Pavilla	Circulator's Address street, city, zip code	growing or 97520 conditions
GE 121 rev 01/18 ONS 249 072	County Elections Officials provide a separate certification to attach to the petition.	

SEL 121 rev 01/18 ORS 249.072

Candidate Signature Sheet Nonpartisan	Nonpartisan		Petition ID C2020-03C
SOME Circulators	rs for this petition are being paid igners of this page must be active reprise county elections official before the p	aid. registered voters in the county listed. re petition can be filed with the filing officer.	County JACKSON
Candidate Information			
Name GERARDO PADILLA		office ASHLAND CI	CITY COUNCIL
Election GENERAL		District or Position Number (in ASHLAND CITY COUNCIL SEAT 3	District or Position Number (include city if applicable) ASHLAND CITY COUNCIL SEAT 3
To the Elections Official/Filling Officer, We Signers must initial any changes the circ Signature	the undersigned voters, request to culator makes to their printed name to be signed mm/dd/w	To the Elections Official/Filling Officer, We the undersigned voters, request the candidate's name be placed on the ballot at the Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the pet Signature Date Signed mm/6d/w Print Name The Company of the pet they signed they signed the pet they signed the pet they signed they signed the pet they signed the pet they signed they signed the pet they signed they signed they signed the pet they signed they s	at the election listed above for nomination to the office indicated. petition. Residence or Mailing Address street city, sip code 603 (NDDSS FONT LODO FEMALE)
	Aug 15 2020	CHES LATS	if
Sec	8.03.2020	Charles here boundables	431 N HOLLING Mr. AMburd CR97
6			
7			
5			
Circulator Certification This certification I heyeby certify that I witnessed the signing pethion (ORS 249.061). I also hereby certify	on must be completed by the circu of the signature sheet by each indi that compensation I received, if a	Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet one I heefby certify that I witnessed the signature sheet, and I believe each individual whose signature appears on the signature sheet, and I believe each petition (DRS 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 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 hepeby 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 (DRS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.
The state of the s		08.03. 7020	20
Circulator Signature On Al 1114		Date Signed mm/dd//w	Sheet Number Completed by Candidate
Printed Name of Circulator		Circulator's Address street, city, zip code	The state of the s

SOME Circulators No Circulators for this petition	for this petition are being paid.		remonit
minating petition. Signers werfied by the appropriate of	of this page must be active registr unity elections official before the petiti	ered voters in the county listed. on can be filed with the filing officer.	County JACKSON
Candidate Information			
Name GERARDO PADILLA		office ASHLAND CITY COUNCIL	OUNCIL
Election GENERAL		District or Position Number (include city if applicable) ASHLAND CITY COUNCIL SEAT 3	ude city if applicable)
To the Elections Official/Filing Officer, We the un	ndersigned voters, request the can	didate's name be placed on the ballot at the elec	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 Signature Date Signed mm/dd/yy Print Name	makes to their printed name, resi	Idence address or date they signed the petition. Print Name	Residence or Mailing Address street, city, zip code
J. Chi	07/25/20	Edward B. Hight	357 Glenn St, Aslian
a Maria	07/30/2020	German Iberra	1615 Valley View Dr., Nudha
3 Line France	07/30/2020	TERRY L. Poberts	1942 mill CRdR Rospect
a die	1/30/20	Tyme Cunter	618 Shapow W
S HARL	07/8/2	Long Stewn	2812 Council nose problems
6 Miles	07-30-20	Rebecca Jahnson	742 NW BulsTGends
011/00	1-30-2020	Richard Tanksley	20778 July May Marked Or 97
8 Will Shirt	7/30/2020	Array Colon Scrapers	3777 Jalon St Spc 35 mi
Monda pliether	1/30/2020	Morrica Solicethos	538 Blue Moon Dr.
30 Jandra Brook	7/30/2020	Supple Supp !	2251 TableRock RD#23"
Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet one I hereβθρεττίδη that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each 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.	t be completed by the circulator a signature sheet by each individual ompensation I received, if any, was	nd additional signatures should not be collected whose signature appears on the signature sheet, and based on the number of signatures obtained	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 pertify in [ORS 249.061]. Lalso hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.
HAL-		06.63. 2026	03
Circulator Signature	D	Date Signed mm/dd/yy	Sheet Number Completed by
sevendo Rolilla		A	Ashland of 97520 condidate
SEL 121 re+90/18/08/349/072	County Elections Officials	County Elections Officials provide a separate certification to attach to the petition.	

Candidate Signature Sheet	Nonpartisan		Petition ID C2020-03C
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.	ors for this petition are being paid. Signers of this page must be active reg priate county elections official before the p	SOME Circulators No Circulators for this petition are being paid. 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 JACKSON
Candidate Information			
Name GERARDO PADILLA		office ASHLAND	CITY COUNCIL
Election GENERAL		District or Position Number (in ASHLAND CITY COUNCIL SEAT 3	District or Position Number (include city if applicable) ASHLAND CITY COUNCIL SEAT 3
To the Elections Official/Filing Officer, W Signers mustiplial any changes the cir Signature	e the undersigned voters, request rculator makes to their printed nar Date Signed mm/dd/yy	To the Elections Official/Filing Officer, We the undersigned voters, request the candidate's name be placed on the ballot a signers must install any changes the circulator makes to their printed name, residence address or data they signed the page signed mm/ds/yy Print Name	t at the election listed above for nomination to the office indicated. petition. Residence or Mailing Address street, city, zip code
Signature	7/50/2020	(JASA) G- STUMP	228 TABLEROOK PD #23 MEXEMPS
The there	7/50/2020	Vanesa LAnal	3501 and 500 2 / DC Creich CA255
in the best	81,2020	Tim Julian	168 8 St # S
THE STATE OF	8/1/2020	La Brandon	4882 #S
Lydra and	8/1/2020	Salce Idinsa	2/# 18089h
	8/1/2000	Beth Reninger	9686st #8 Ashand, OR
	8/1/2020	Date N. Gallehamo	468 BG # 4 AShbud OLGAS
Sept 1	8/1/200	Ent Peterson	468 8 St # 2 97626
, s fame of	8/11/2020	Auxlo- Echar	108 St St#5 Ashipad De
rundly port 50 th 5	8/11/2020	Samuel Sacks	3 to Bridge St Ashaul
Circulator Certification This certification I hereby certify that I witnessed the signing petition (\$\partit{p}\$RS 249.061). I also hereby certify	ion must be completed by the circ g of the signature sheet by each ing y that compensation I received, if i	Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet one 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 petition (BRS 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 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 detect iterably 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 (BRS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.
The state of the s		0.6.03. 2020	29
Circulator Signature		Date Signed mm/dd/yy	Sheet Number Corrolleted by
Sounds Parilla		200 EN SI H	TA Ashiand on 975% candidate
Printed Name of Circulator		Circulator's Address street city zip code	

Chart No.	martican	Petition ID C2020-03C
Candidate Signature Sheet Northdiction Some Circulators	Candidate Signature Sheet Nonpartison: 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 JACKSON
Candidate Information		
Name GERARDO PADILLA	Office ASHLAND CITY COUNCIL	COUNCIL
Election GENERAL	District or Position Number (in: ASHLAND CITY COUNCIL SEAT 3	(include city if applicable)
To the Elections Official/Filing Officer, We the un	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	ection listed above for nomination to the office indicated.
Signers must initial any changes the circulator	Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition. Date Signed mm/dd/yy Print Name	Residence or Mailing Address street, city, alp code
that he	7.28.20 Ferrando Padrilla	266 9th St. Ashland, or 97520
	7-28-20 Dave (scal)	939 5 Whitey View 20 " to Ashound, 02
	8	292 B St. ASTIGNA 108 97520
0 124	7/29/20 Quim Courtinat	1094 B d. #3 Ashland.
7	7-29-20 Trever Coster	259 5th Ashand M. STOR
Smalecoster	7.29.20 Simone Coster 25	59 5th St Ashland, 02 97520
	7. 29.20 F. MARKHINTChinson	735 5m Ashland 0297520
S S S S S S S S S S S S S S S S S S S	8/1/10 Sordon Shepard	2367 (sere Coveran long medioca
	8/1/000 Monn Clarket	583 1. Mountain Istaland 0,7520
M CE SOL	8/1/2020 Ryan C Werner	220 + St*7 Abhar, Or 9750
Circulator Certification This certification mu I hereby certify that I witnessed the signing of the	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 clinically 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 I hereby certify that I witnessed the significant is a companient of I received. If any, was not based on the number of signatures obtained for this petition.	lected on this sheet once the certification has been signed and dated! sheet, and I believe each person is a voter qualified to sign the brained for this petition.
	08.05.707.0	3
Circulator Signature	Date Signed mm/dd/yy	Sheet Number Completed by
(Jevando Padilla	200 5K St	THE KNITH THE 9250
Printed Name of Circulator	Circulator's Address street, city, alp code	

	Sheet Number Completed by Candidate	Date Signed mm/dd/yy 266 574 St UNH A Circulator's Address street, dity, 819 code		Circulator Signatury Sergizdo Padilla
	Circulator Certification whis certification must be completed by the circulator and additional signatures should not be considered on this area where the construction is a voter qualified to sign the liberary certify that I witnessed the significant 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 Certification whis certification must be completed by the circulator and additional signatures should not be conscised on this street once the conscisuous periting that I witnessed the signature sheet, and I believe each individual whose signature appears on the signature sheet, and I believe each periting (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this perition.	t be completed by the circular ignature sheet by each Indivi impensation I received, if any	Circulator Certification Whis certification must I hereby certify that I witnessed the signing of the spetition (ORS 249.061). I also hereby certify that co
EL STENO	100 NOPTH PRCIFIC HWY APT 96 TALENT	Brianna Lucranos	8/6/20	10 Bismer Justanes
	460 Sisk; Blue Ly W	Diama Goldbers	8/6/20	s O. D. D. S.
	400 Siskiyou Shall Apw	Diana Gollbers	-8/0/20	h 1
	460 Siskiyou Blud., Apt. W	Nastassia Goldberg	8/6/20	6 Nantagain Colabora
	172 California St #3	Pausty Favace Calclo Dizmang	8/6/20	& Child Com
PHAIL	59 N. Main St. #2	Catharine Cavin	8/6/20	THE SE
4,935	Ince or Malling Address street	residence address or date they signed the petition. Print Name Ciley Sova	lersigned voters, request the makes to their printed name, Date Signed mm/dd/yv	To the Elections Official/Filling Officer, We the undersigned voters, request the candidate's name be placed on the ballot Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the Signature Date Signed mm/dd/yy Print Name Signature Out Sova
	ide city if applicable)	ASHLAND CITY COUNCIL SEAT 3		Election GENERAL
	JUNCIL	Office ASHLAND CITY COUNCIL		Name GERARDO PADILLA
1	ECEIVED T: 40 PM County JACKSON	Z	onpartisan for this petition are being paid, s of this page must be active reg county elections official before the p	Candidate Signature Sheet Nonpartisan 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.

SEL 121 rev 01/18 ORS 248.072

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

	Sheet Number Completed by Candidate	Date Signed mm/dd/yy 266 574 St UNH A Circulator's Address street, dity, 819 code		Circulator Signatury Sergizdo Padilla
	Circulator Certification whis certification must be completed by the circulator and additional signatures should not be considered on this area where the construction is a voter qualified to sign the liberary certify that I witnessed the significant 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 Certification whis certification must be completed by the circulator and additional signatures should not be conscised on this street once the conscisuous periting that I witnessed the signature sheet, and I believe each individual whose signature appears on the signature sheet, and I believe each periting (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this perition.	t be completed by the circular ignature sheet by each Indivi impensation I received, if any	Circulator Certification Whis certification must I hereby certify that I witnessed the signing of the spetition (ORS 249.061). I also hereby certify that co
EL STENO	100 NOPTH PRCIFIC HWY APT 96 TALENT	Brianna Lucranos	8/6/20	10 Bismer Justanes
	460 Sisk; Blue Ly W	Diama Goldbers	8/6/20	s O. D. D. S.
	400 Siskiyou Shall Apw	Diana Gollbers	-8/0/20	h 1
	460 Siskiyou Blud., Apt. W	Nastassia Goldberg	8/6/20	6 Nantagain Colabora
	172 California St #3	Pausty Favace Calclo Dizmang	8/6/20	& Child Com
PHAIL	59 N. Main St. #2	Catharine Cavin	8/6/20	THE SE
4,935	Ince or Malling Address street	residence address or date they signed the petition. Print Name Ciley Sova	lersigned voters, request the makes to their printed name, Date Signed mm/dd/yv	To the Elections Official/Filling Officer, We the undersigned voters, request the candidate's name be placed on the ballot Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the Signature Date Signed mm/dd/yy Print Name Signature Out Sova
	ide city if applicable)	ASHLAND CITY COUNCIL SEAT 3		Election GENERAL
	JUNCIL	Office ASHLAND CITY COUNCIL		Name GERARDO PADILLA
1	ECEIVED T: 40 PM County JACKSON	Z	onpartisan for this petition are being paid, s of this page must be active reg county elections official before the p	Candidate Signature Sheet Nonpartisan 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.

SEL 121 rev 01/18 ORS 248.072

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

Candidate Signature Sheet Nonpartisan	RECEIVED Petition ID C2020-03C
SOME Circulators In 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.	
Candidate Information	
Name GERARDO PADILLA	Office ASHLAND CITY COUNCIL
Election GENERAL	District or Position Number (include city if applicable) ASHLAND CITY COUNCIL SEAT 3
To the Elections Official/Filing Officer, We the undersigned voters	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 no Signature Date Signed mm/dd/yy	Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the person. Signature Date Signed mm/dd/yy Print Name Signature Residence or Mailing Address street, city, zip code
Chimosh	Flora Chipowsky
Ninches 8:61	20 Ollvia knox / 276 W Nevada St Ashland
Jan dollar 8.6.20	Sige Ashley
The Company	700
Sook Marthy 8.	6-20 SCOTT YAMPLEY YET FAILVIEW St. #7 ASKARLOR
& Divar Durens 1-1	2020 Bridge Owens 321 Clay St #44 Addamson Giston
, his maple 8.1	0.2020 Luc trolegy 297 particiled philad or 925%
0 00	
Circulator Certification This certification must be completed by hereby dignify that I witnessed the signing of the signature sheet by petition (ORS 249.061). I also hereby certify that compensation I re-	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 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.
5	08.00.20
Circulator Signature	0 \$
(serardo Padilla	26 5th St Unit A AMpand, of 97520 Conditions
Printed Name of Circulator	Circulator's Address street, city, alp code

VOLUNTARY CONTRIBUTION & SPENDING LIMITS FOR CANDIDATES FOR CITY OFFICES AMC 2.41

	PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK	
Candidate Political Committee	Primary 20 General 2020 Other Election	ction Date
Candidate or Political Committee Name GERARDO PADILLA		Committee Identification Number C2020-03C
Treasurer's Full Name		Telephone Number (day) 415-913-8177
Address (street or route, city, state, zip code) 266 5TH ST UNIT A. ASHLAND, OREGON 97520	520	
Office of Filing ASHLAND CITY COUNCIL SEAT 03		
I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of campaign/committee), or, if I am signing as a treasurer of a political committee organized exclusively to support will not make attributable expenditures in this election in excess of \$3,875.00.	tures for this election in excess of organized exclusively to support	\$3,875.00 (including expenditures of my principal or to appose a candidate, I certify that the committee
Candidate or treasurer's signature	Date Signed 08-06-2020	
[NOTE: If the candidate or committee treasurer elects above.]	[NOTE: If the candidate or committee treasurer elects NOT to be bound by the expenditure limitations, the following line should be signed instead of the line above.]	lowing line should be signed instead of the line
I elect not to be limited to the attributable expenditures specified in this certificate and city ordinance	secified in this certificate and city ordinance.	
Candidate or treasurer's signature	Date Signed	
The City Recorder is authorized to publish a statement in expenditures.	The City Recorder is authorized to publish a statement in the City, indicating whether or not the candidate has agreed to limit expenditures.	to limit

If the City Recorder or the City Attorney finds that a candidate filing a declaration of limitation on expenditures has exceeded the applicable expenditure limit, at the next election at which the candidate is a candidate for election to public office, the City

RECEIVED AUG 0 6 2020

Recorder shall publish a statement, in the City, indicating that the candidate violated a previous declaration of limitation.