

Petition Submission
Candidate, Voters' Pamphlet

RECEIVED AUG 08 2018

WJW

SEL 338

rev. 01/18
 OAR 165-010-0005, 165-016-0000

→ This form must be completed and filed with any submission of signatures.

Filing Officer		
<input type="checkbox"/> State	<input type="checkbox"/> County For both county and district petitions.	<input checked="" type="checkbox"/> City

Election Type		Year			
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special Election	<input checked="" type="checkbox"/> 2018	<input type="checkbox"/> 2019	<input type="checkbox"/> 2020

Petition Information	
Number	Type <input checked="" type="checkbox"/> Candidate Nominating <input type="checkbox"/> Voters' Pamphlet, Candidate <input type="checkbox"/> Voters' Pamphlet, Measure

Type of Filing	Number of Signatures Submitted
<input checked="" type="checkbox"/> Candidate Nominating	27 29
<input type="checkbox"/> Voters' Pamphlet, Candidate	
<input type="checkbox"/> Voters' Pamphlet, Measure	

Candidate
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name <i>Michael Morris</i>	Contact Phone <i>541-621-9406</i>	Email Address <i>MIKEFORALHAND@EMILYON</i>
Signature <i>[Signature]</i>	Date Signed <i>8/8/18</i>	

Measure Argument Filer
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name	Contact Phone	Email Address
Signature	Date Signed	

For office use only	
Submittal number	Number of signatures accepted
Is the petition complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be additional submittals? <input type="checkbox"/> Yes <input type="checkbox"/> No

Candidate Filing
Major Political Party or Nonpartisan

RECEIVED JUN 06 2018
W. Whitaker

SEL 101
rev 01/18
ORS 249.031

Filing Dates		Candidate Filing	State Voters' Pamphlet	Candidate Withdrawal
Primary Election May 15, 2018	First Day to File Last Day to File	September 7, 2017 March 06, 2018	January 15, 2018 March 8, 2018	March 9, 2018
General Election November 6, 2018	First Day to File Last Day to File	May 30, 2018 August 28, 2018	July 9, 2018 August 28, 2018	August 31, 2018

Filing Information

This filing is an Original Amendment

Filing Officer Secretary of State County Elections Official City Recorder (Auditor)

Office Information

Filing for Office of: *ASHLAND CITY COUNCIL POS #2*

District, Position or County: *POSITIONAL #2*

Party Affiliation: Democratic Party Republican Party Independent Party Nonpartisan

Incumbent Judge (for judicial candidates only): Yes No Nondisclosure on file

Filing Method

Fee

Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Senator	\$150	MSD Executive Officer, MAD Director	\$100
United States Representative	\$100	MSD Councilor	\$25
Statewide Offices	\$100	County Office	\$50
State senator or Representative	\$25	City Office	Set by charter or ordinance
Circuit Court Judge	\$50	Justice of the Peace	n/a

Prospective Petition, in lieu of filing fee Some circulators may be paid Yes No

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<i>MICHAEL</i>		<i>R MORRIS</i>		

How you would like your name to appear on the ballot

MICHAEL MORRIS

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<i>1300 TOLMAN CREEK RD</i>	<i>ASHLAND</i>	<i>OR</i>	<i>97520</i>	<i>JACKSON</i>

Candidate Mailing Address and Contact Information Only one phone number is required.

Street Address or PO Box	City	State	Zip
<i>1300 TOLMAN CREEK RD</i>	<i>ASHLAND</i>	<i>OR</i>	<i>97520</i>

Work Phone	Home Phone	Cell Phone	Fax
		<i>541-621-9406</i>	

Email Address _____ Web Site, if applicable _____

Occupation (present employment) If no relevant experience, None or NA must be entered.
CONSTRUCTION CONTRACTOR - SELF EMPLOYED

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
THE BROWN COMPANY SEATTLE WA.
SR STRUCTURES DESIGN ENGR.

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
SOUTHERN OREGON STATE COLLEGE			BUSINESS
OREGON INSTITUTE OF TECHNOLOGY		BS.	MELM. ENGR. TECH.
ASHLAND PUBLIC SCHOOLS			

Educational Background (other) Attach a separate sheet if necessary.

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.
ASHLAND CITY COUNCIL POS #2 2011 - PRESENT
ASHLAND PLANNING COMMISSION 1997 - 2010

Campaign Finance Information Not applicable to candidates for federal office.

Candidate Committee This section should not be amended at a later date.

Yes, I have a candidate committee.

No, I do not expect to spend or receive more than \$750 during each calendar year. The \$750 includes personal funds spent for any campaign-related costs, such as the candidate filing fee; however state voters' pamphlet filing fees are not included when calculating contribution or expenditure totals. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.

NOTE: If you have previously filed for office please check with the Elections Division to verify if you have an existing candidate committee.

No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

Candidate Attestation

By signing this document, I hereby state that:

- I will accept the nomination for the office indicated above;
- I will qualify for said office if elected;
- All information provided by me on this form is true to the best of my knowledge; and
- No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

For Major Political Party Candidates

- if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.

Warning

Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. (ORS 260.715). A person may only file for one lucrative office or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)


Candidate Signature

6/6/2018
Date

CITY OF
ASHLAND

June 6, 2018

Michael Morris
1300 Tolman Creek Rd.
Ashland OR 97520

A prospective petition has been completed and filed with the City Recorder's Office for City Council Position #2.

Petition ID CC2018-02 has been approved for circulation to obtain the required 25 signatures for this position. Deadline to submit petitions to the Election Officer is August 16, 2018.





Melissa Huhtala
City Recorder



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

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

<u>Candidate</u>	Political Committee	Primary 20__	General 20 <u>18</u>	Other Election Date	Committee Identification Number
Candidate or Political Committee Name					
<u>MICHAEL MORRIS</u>					
Treasurer's Full Name					
<u>MICHAEL MORRIS</u>					
Address (street or route, city, state, zip code)					
<u>1300 TOMMAN CREEK ROAD ASHLAND, OR 97520</u>					
Office of Filing					
<u>ASHLAND city Council</u>					
<p>I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of \$3,869.00 (including expenditures of my principal campaign committee), or, if I am signing as a treasurer of a political committee organized exclusively to support or to oppose a candidate, I certify that the committee will not make attributable expenditures in this election in excess of \$3,869.00.</p>					
 Candidate or treasurer's signature					<u>6/6/18</u> Date Signed
<p>[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.]</p> <p>I elect not to be limited to the attributable expenditures specified in this certificate and city ordinance.</p>					
Candidate or treasurer's signature					Date Signed
<p>The City Recorder is authorized to publish a statement in the City, indicating whether or not the candidate has agreed to limit expenditures.</p> <p>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 Recorder shall publish a statement, in the City, indicating that the candidate violated a previous declaration of limitation.</p>					
					RECEIVED JUN 06 2018 

CITY OF
ASHLAND

August 13, 2018

Michael Morris
1300 Tolman Creek Rd.
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 the City Council Position #2.

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



Melissa Huhtala
City Recorder



County: JACKSON
User Name : Myers, Trisha

Petition Processing Statistics Report

Date : 8/13/2018 9:16:13 AM

Number : CC 2018-02 Title : ASHLAND CITY COUNCIL POSITION 2- MICHAEL MORRIS

Petition Information

Petition Name : ASHLAND CITY COUNCIL POSITION 2- MICHAEL MORRIS

Petition Date : 06/06/2018

Date Filed : 06/06/2018

End Circulation Date : 08/08/2018

Minimum Signatures Required : 25

Accepted Of Minimum : (112.00%)

Total Signatures Processed : 29

Processing Summary Sample: All

Total Accepted Signatures : 28 (97%) **Of Those Processed**

Total Rejected Signatures : 1 (3%) **Of Those Processed**

Accepted Reason	Total	(% Rejected)
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Valid Signature	28	(100%)
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Rejected Reason	Total	(% Rejected)
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Out of District	1	(100%)
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Candidate Signature Sheet | Nonpartisan

Petition ID CC 2018-02

Signatures for this petition are being gathered by PAID Circulators VOLUNTEER Circulators
 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.
 Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County JACKSON

Candidate Information	
Name <u>MICHAEL MORRIS</u>	Office <u>ASHLAND CITY COUNCIL</u>
Election <u>GENERAL ELECTION</u>	
District or Position Number <u>Pos #2</u>	

To the Secretary of State of Oregon/County Elections Official/City Recorder, 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
<u>[Signature]</u>	<u>6/6/18</u>	<u>MICHAEL MORRIS</u>	<u>1300 Tolman Cr Road Ashland 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Sharon Laskos</u>	<u>1420 Fielder - Ashland 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Edward Laskos</u>	<u>1420 Fielder St. Ashland OR 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>John Linnehan</u>	<u>826 Oak Knoll Dr Ashland OR 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Amanda Linnehan</u>	<u>" "</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>ELIZABETH HOFFMANN</u>	<u>470 CLAYTON ST, ASHLAND OR 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Vicki Bernard</u>	<u>1154 Tolman Circle Ashland 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Frederic DeArmond</u>	<u>1154 Tolman Cr. Rd. Ashland 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>RICHARD BERNARD</u>	<u>598 N. MAIN, ASHLAND OR 97520</u>
<u>[Signature]</u>	<u>6/8/18</u>	<u>Lisa S. Shapiro</u>	<u>975 Walkway Ashland, OR 97520</u>

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.

[Signature]
 Circulator Signature
 Date Signed 6/8/18 mm/dd/yy
 Sheet Number 1

Sheet will be numbered by group submitting the petition.

Printed Name of Circulator MICHAEL MORRIS
 Circulator's Address street, city, zip code 1300 Tolman Cr Rd Ashland 97520

Candidate Signature Sheet | Nonpartisan

Signatures for this petition are being gathered by PAID Circulators VOLUNTEER Circulators

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.
- Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

Petition ID CC 2018-02

County TJerson

Candidate Information	
Name <u>MICHAEL MORRIS</u>	Office <u>ASHLAND CITY COUNCIL</u>
Election <u>GENERAL</u>	District or Position Number <u>02</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, 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
<u>[Signature]</u>	<u>07-27-18</u>	<u>Russell W. Silvers</u>	<u>906 Clear Creek KPR. Ashland 97520</u>
<u>[Signature]</u>	<u>7-27-18</u>	<u>Eric J. Korman</u>	<u>419 Canyon St. Ashland 97520</u>
<u>[Signature]</u>	<u>07/27/18</u>	<u>MICHAEL DAWKINS</u>	<u>646 EAST MAIN 97520</u>
<u>[Signature]</u>	<u>7-27-2018</u>	<u>Robert E MacCracken</u>	<u>421 Clifton St Ashland 97520</u>
<u>[Signature]</u>	<u>7-27-2018</u>	<u>Senniter MacCarson</u>	<u>431 Clinton St Ashland, OR</u>
<u>[Signature]</u>	<u>8-5-18</u>	<u>Gayle Morris</u>	<u>813 Glenloch Ave - Ashland, OR</u>
<u>[Signature]</u>	<u>8/7/18</u>	<u>Mike Gardiner</u>	<u>349 Orange Ave Ashland, OR 97520</u>
<u>[Signature]</u>	<u>8/8/18</u>	<u>Vanston Shaw</u>	<u>608 Dager St Ashland 97520</u>
<u>[Signature]</u>	<u>8/18/18</u>	<u>Synthia L. Bernard</u>	<u>128 WINTER ST. Ashland 97520</u>
<u>[Signature]</u>	<u>8-8-18</u>	<u>JEANNE M. TAYLOR</u>	<u>1176 HIGHROAD DR</u>

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 [Signature] Date Signed 8/8/18 mm/dd/yy 2 Sheet Number

Sheet will be numbered by group submitting the petition.

Printed Name of Circulator MICHAEL MORRIS Circulator's Address 1300 Tolman Ct. Ashland 97520 street, city, zip code

Candidate Signature Sheet | Nonpartisan

Petition ID CC 2018-02

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County TACKSON

Candidate Information	
Name <u>MURRAY MORRIS</u>	Office <u>ASHLAND CITY COUNCIL</u>
Election <u>GENERAL</u>	District or Position Number <u>#2</u>

To the Secretary of State of Oregon/County Elections Official/City Recorder, 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.

Residence or Mailing Address street, city, zip code

Date Signed mm/dd/yy

Signature

Print Name

- [Signature] 8/8/18 Vincent P. Shubert 919 Plum Ridge Rd.
- [Signature] 8/8/18 Nancy J. Shubert 919 Plum Ridge Dr.
- [Signature] 8/8/18 Jerome White 253 N. THIRD ST. ASHLAND, OR 97132
- [Signature] 8.8.18 MATT SWAN PO BOX 545, ASHLAND, OR 97130
- [Signature] 08/08/18 THOMAS LA MORE 784 OAK ST. ASHLAND, OR 97130
- [Signature] 08/08/18 RAY CHIRGWIN 565 ALTAMONT ST. ASHLAND, OR 97130
- [Signature] 8/8/18 Joe Peterson 294 Village Park Ashland 97132
- [Signature] 8/8/18 Marie Lange 2345 Blue Sky Lane, Ashland 97130
- [Signature] 8/8/18 JUSTIN DONOVAN 864 CYPRESS POINT LOOP, ASHLAND
- [Signature] _____

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.

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[Signature] 8/8/18
 Date Signed mm/dd/yy

Sheet Number
3

Sheet will be numbered by group submitting the petition.

Murray Morris
 Printed Name of Circulator

1300 Tolman Dr. 720 Ashland 97130
 Circulator's Address street, city, zip code