

Filing of Candidacy for Nonpartisan Nomination

SEL 120
rev 01/10: ORS 249.031

→ *This information is a matter of public record and may be published or reproduced.*

Filing Information

Secretary of State of Oregon County Elections Official of _____ County
 City Recorder (Auditor), City of Ashland

Candidate and Party Information

Incumbent for Office of Judge

Candidate Name

Barbara Christensen

Filing for Office of
City Recorder

How Name Should Appear on Ballot

Barbara Christensen

District or Position Number

Residence Address, Street/Route

759 Willow Street

City

Ashland

State

OR

Zip Code

97520

County of Residence

Jackson

Home Phone

541 482 3343

Work Phone

541 488 5307

Cellular Phone

Fax

Email Address

christeb@ashland.or.us

Website

Mailing Address where all correspondence will be sent, **Street/Route** same

City

State

Zip Code

Filing Type

Filing of Candidacy by Declaration, with the Required Filing Fee (ORS 249.056)

Filing Fees:

Filing of Candidacy by Declaration (ORS 249.056)

Filing Fee State Voters' Pamphlet (ORS 251.095)

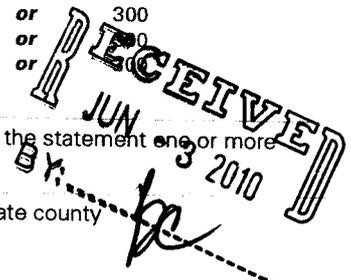
Petition Signatures Required

Statewide Offices	\$100	\$3000	or	500
Circuit Court Judge	\$50	\$600	or	300
District Attorney	\$50	\$600	or	300
County Judge	\$50	\$600	or	300
MSD Executive Officer, MSD Auditor	\$100	\$600	or	300
MSD Councilor	\$25	\$600	or	300
County Office	\$50	\$600	or	300
City Office	set by charter or ordinance	\$600*	or	300
Justice of the Peace	n/a	\$600	or	300

*for cities with a population of 50,000 or more (ORS 251.005)

Filing of candidacy by **prospective** petition, with the required proposed signature sheet (SEL 121) and the statement one or more circulators will or will not be paid (SEL 300) (ORS 249.020)

Filing of candidacy by **completed** petition, with the required signature sheets certified by the appropriate county elections officials (ORS 249.020, 249.064)



2010 Filing Dates: Primary Election May 18, 2010 and General Election November 2, 2010

	Filing for Candidacy	Filing for State Voters' Pamphlet	Withdrawing Candidacy
Primary Election	First Day September 10, 2009	First Day September 10, 2009	
General Election	June 2, 2010	June 2, 2010	
Primary Election	Last Day March 9, 2010	Last Day March 11, 2010	Last Day March 12, 2010
General Election	August 24, 2010	August 24, 2010	August 27, 2010

continued on the reverse side of this form

SEL 120

Required Information (if no relevant information, list "none")

Occupation present employment – paid or unpaid

Paid - City Recorder - City of Ashland

Occupational Background previous employment – paid or unpaid

Elected as City Recorder in 1994 - have served 16 years

Educational Background schools attended, use attachment if needed

Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
University of Oregon	1975		Business
Nestucca Union High School	1973	Diploma	
International Institute of Municipal Clerks	2002	Certified Municipal Clerk (CMC)	
Oregon Municipal Finance Officers Assoc.	2007	Certified Professional Finance Officer	

Other:

Prior Governmental Experience elected or appointed

Elected 1994 to current position of City Recorder

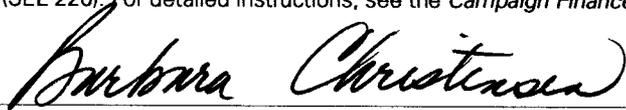
Appointed Business Manager Medford Irrigation District

By signing this document, I hereby state:

- that I will accept the nomination for office indicated
- that I will qualify for said office if elected
- that all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge

Check the applicable box (not applicable to candidates for federal office – US Senate and US Representative):

- By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than \$350 or receive more than \$350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$350 during a calendar year, I must follow the requirements detailed in the *Campaign Finance Manual*.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the *Campaign Finance Manual*.



Candidate's Signature

June 3, 2010

Date Signed

→ **This information is a matter of public record and may be published or reproduced.**

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 at the same election. Unless the person has withdrawn from the first filing, **all** filings are invalid. (ORS 249.013(3))

For Office Use Only

Initials	Cash or Check Number	Candidate ID Number
Receipt Number	Office Number	Candidate Committee ID Number

Statement One or More Petition Circulators Will Be Paid

Recall Only

SEL 300
ORS 249.061, ORS 249.078,
rev 01/10: ORS 248.008,
ORS 249.740, ORS 249.865

I/We hereby declare one or more petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the 10th day after I/we first have knowledge or should have had knowledge that no petition circulator will be paid for obtaining signatures.

Identify Petition Name of Officeholder on Recall Petition

Signed

Date Signed

Statement must be signed by one of the following:

→ Chief Petitioner for Recall Petition

Statement No Petition Circulators Will Be Paid

SEL 300
rev 01/10: ORS 248.008,
ORS 249.061, ORS 249.078,
ORS 249.740, ORS 249.865

I/We hereby declare no petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the 10th day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be compensated for obtaining signatures.

Identify Petition Name of Officeholder on Recall Petition

Barbara Christensen for City Recorder - City of Ashland

Barbara Christensen

June 3, 2010

Date Signed

Signed

Statement must be signed by one of the following:

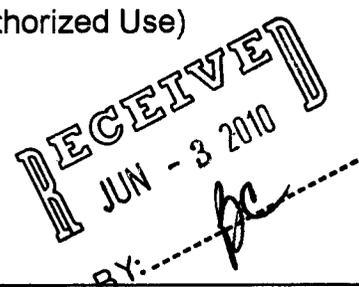
→ Chief Petitioner for Recall Petition

RECEIVED
JUN - 3 2010
BY: *bc*

CERTIFICATE FOR VOLUNTARY CONTRIBUTION & SPENDING LIMITS

CITY OF ASHLAND AMC 2.41

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Political Committee		<input type="checkbox"/> Primary 20__ <input checked="" type="checkbox"/> General 20 <u>10</u> <input type="checkbox"/> Other Election Date	
Candidate or Political Committee Name <i>BARBARA CHRISTENSEN</i>		Committee Identification Number	
Treasurer's Full Name <i>BARBARA CHRISTENSEN</i>		Telephone Number (day) <i>541 488 5307</i>	
Address (street or route, city, state, zip code) <i>759 WILLOW ST Ashland</i>			
Office of Filing <i>City Recorder</i>			
<p>I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of \$3,213.25 (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 \$3,213.25.</p>			
<i>Barbara Christensen</i> Candidate or treasurer's signature		<i>6/3/10</i> 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	
The City Recorder is authorized to publish a statement in the City, indicating whether or not the candidate has agreed to limit expenditures.		(Authorized Use) 	
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.			

Petition for Nonpartisan Nomination Signature Sheet

Petition ID 2010-01

One or More No Petition circulators will be paid (mark one)

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

Note to Candidate: Petition signatures must be verified before the petition can be filed with the filing officer. Submit the petition in ample time for the process to be completed before 5pm on the filing deadline day.

Candidate's Name <u>BARBARA CHRISTENSEN</u>	Office <u>CITY RECORDER</u>	District or Position Number if applicable <u>CITY OF ASHLAND</u>
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To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next _____ election following the filing of this petition.

→ Signers must initial any changes that they or 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	Precinct # optional
1 <u>Barbara M Christensen</u>	<u>01/31/10</u>	<u>BARBARA CHRISTENSEN</u>	<u>759 WILLOW ST ASHLAND</u>	<u>97530</u>
2				
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Circulator Certification This certification must be signed by the circulator.

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 individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. **Warning!** Falsely signing this statement 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)

Circulator Signature	Date Signed mm/dd/yy
Printed Name of Circulator	Circulator's Address street, city, zip code

County Elections Official Certification

I hereby certify _____ signatures on this petition are those of active registered voters in _____ County, Oregon.

Signature of County Elections Official	Date Certified mm/dd/yy
--	-------------------------

01
Sheet Number

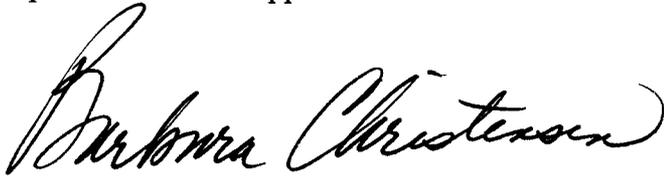
CITY OF ASHLAND

June 3, 2010

Barbara Christensen
759 Willow Street
Ashland OR 97520

A prospective petition has been completed and filed with the City Recorder's Office for City Recorder

A petition has been approved for circulation.



Barbara Christensen
City Recorder



CITY OF
ASHLAND

June 25, 2010

Barbara Christensen
759 Willow Street
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 Recorder.

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



Barbara Christensen
City Recorder/Treasurer



Filing of Candidacy for Nonpartisan Nomination

SEL 120
rev 01/10: ORS 249.031

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Filing Information

Secretary of State of Oregon County Elections Official of _____ County
 City Recorder (Auditor), City of Ashland

Candidate and Party Information

Incumbent for Office of Judge

Candidate Name

Barbara Christensen

Filing for Office of
City Recorder

How Name Should Appear on Ballot

Barbara Christensen

District or Position Number

Residence Address, Street/Route

759 Willow Street

City

Ashland

State

OR

Zip Code

97520

County of Residence

Jackson

Home Phone

541 482 3343

Work Phone

541 488 5307

Cellular Phone

Fax

Email Address

christeb@ashland.or.us

Website

Mailing Address where all correspondence will be sent, **Street/Route**
same

City

State

Zip Code

Filing Type

Filing of Candidacy by Declaration, with the Required Filing Fee (ORS 249.056)

Filing Fees:

Filing of Candidacy by Declaration (ORS 249.056)

Filing Fee State Voters' Pamphlet (ORS 251.095)

Petition Signatures Required

	Filing of Candidacy by Declaration (ORS 249.056)	Filing Fee State Voters' Pamphlet (ORS 251.095)	Petition Signatures Required
Statewide Offices	\$100	\$3000	or 500
Circuit Court Judge	\$50	\$600	or 300
District Attorney	\$50	\$600	or 300
County Judge	\$50	\$600	or 300
MSD Executive Officer, MSD Auditor	\$100	\$600	or 300
MSD Councilor	\$25	\$600	or 300
County Office	\$50	\$600	or 300
City Office	set by charter or ordinance	\$600*	or 300
Justice of the Peace	n/a	\$600	or 300

**for cities with a population of 50,000 or more (ORS 251.005)*

Filing of candidacy by **prospective** petition, with the required proposed signature sheet (SEL 121) and the statement one or more circulators will or will not be paid (SEL 300) (ORS 249.020)

Filing of candidacy by **completed** petition, with the required signature sheets certified by the appropriate county elections officials (ORS 249.020, 249.064)

2010 Filing Dates: Primary Election May 18, 2010 and General Election November 2, 2010

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Primary Election	First Day September 10, 2009	First Day September 10, 2009	
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Primary Election	Last Day March 9, 2010	Last Day March 11, 2010	Last Day March 12, 2010
General Election	Last Day August 24, 2010	Last Day August 24, 2010	Last Day August 27, 2010

RECEIVED
JUN 3 2010
BY: [Signature]
RECEIVED
JUN 25 2010
BY: [Signature]

continued on the reverse side of this form

SEL 120

Number :Ashland 2010-01 Title :City recorder - Barbara Christiansen

Petition Information

Petition Name : City recorder - Barbara Christiansen

Petition Date : 06/11/2010

Date Filed : 06/11/2010

End Circulation Date : 08/29/2010

Minimum Signatures Required : 25

Accepted Of Minimum : (120%)

Total Signatures Processed : 30

Processing Summary Sample: All

Total Accepted Signatures :	2	(7%)	Of Those Processed
Accepted Registrant :	2	(100%)	Of Those Accepted
Total Rejected Signatures :	1	(3%)	Of Those Processed

Accepted Reason	Total	(% Rejected)
Valid Signature	26	(100%)

Rejected Registrant :	1	(100%)	Of Those Rejected
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Rejected Reason	Total	(% Rejected)
Inactive Due to Not Voting	1	(100%)

Number :Ashland 2010-01 Title :City recorder - Barbara Christiansen

Petition Information

Petition Name : City recorder - Barbara Christiansen

Petition Date : 06/11/2010

Date Filed : 06/11/2010

End Circulation Date : 08/29/2010

Minimum Signatures Required : 25

Accepted Of Minimum : (108%)

Total Signatures Processed : 27

Processing Summary Sample: All

Total Accepted Signatures :	24	(89%)	Of Those Processed
Accepted Registrant :	24	(100%)	Of Those Accepted
Total Rejected Signatures :	3	(11%)	Of Those Processed

Accepted Reason	Total	(% Rejected)
Valid Signature	24	(100%)

Rejected Registrant :	2	(67%)	Of Those Rejected
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Rejected Reason	Total	(% Rejected)
Signatures Do Not Match	1	(33.3%)
Not Registered (Includes Cancelled)	1	(33.3%)
Signed Before Date Registered to Vote (Too Late)	1	(33.3%)

Petition for Nonpartisan Nomination Signature Sheet

Petition ID 2010-01

One or More No Petition circulators will be paid (mark one)

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

Note to Candidate: Petition signatures must be verified before the petition can be filed with the filing officer. Submit the petition in ample time for the process to be completed before 5pm on the filing deadline day.

Candidate's Name: BARBARA CHRISTENSEN Office: CITY RECORDER District or Position Number if applicable: CITY OF ASHLAND

To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next General election following the filing of this petition.

→ Signers must initial any changes that they or 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	Precinct # optional
<i>[Signature]</i>	6/3/10	BARBARA CHRISTENSEN	759 WILLOW ST ASHLAND 97520	
<i>[Signature]</i>	6/3/10	Michael H. Gibbs	536 Ashland St Ashland 97520	
<i>[Signature]</i>	6/3/10	Kerry KenCairn	147 CENTRAL ASHLAND 97520	
<i>[Signature]</i>	6-3-10	Pete Belcastro	447 Monte Vista Ashland 97520	
<i>[Signature]</i>	6.3.10	Scott Allen	1042 Bellview Ashland OR 97520	
<i>[Signature]</i>	6/3/10	W.H. Hoffbauer	680 Glenwood Dr Ashland 97520	
<i>[Signature]</i>	6/3/10	ALAN W. DE BOER	2260 MORADA LN. Ashland 97520	
<i>[Signature]</i>	6/3/10	marie donovan	320 Hemlock Lane, Ashland 97520	
<i>[Signature]</i>	6-3-10	Kathleen Mackris	519 Allison St. Ashland 97520	
<i>[Signature]</i>	6.3.10	Donnan B. Runkel	586 E Main St. Ashland 97520	

Circulator Certification This certification must be signed by the circulator.

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 individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. **Warning!** Falsely signing this statement 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)

Circulator Signature: Barbara Christensen Date Signed mm/dd/yy: 6/14/2010
 Printed Name of Circulator: BARBARA CHRISTENSEN Circulator's Address street, city, zip code: 759 WILLOW ST ASHLAND

County Elections Official Certification

I hereby certify 9 signatures on this petition are those of active registered voters in Jackson County, Oregon.
 Signature of County Elections Official: *[Signature]* Date Certified mm/dd/yy: 6-15-10

01
 Sheet Number

Petition for Nonpartisan Nomination Signature Sheet

Petition ID 2010-01

One or More No Petition circulators will be paid (mark one)

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

Note to Candidate: Petition signatures must be verified before the petition can be filed with the filing officer. Submit the petition in ample time for the process to be completed before 5pm on the filing deadline day.

Candidate's Name <u>BARBARA CHRISTENSEN</u>	Office <u>CITY RECORDER</u>	District or Position Number if applicable <u>CITY OF ASHLAND</u>
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To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next General election following the filing of this petition.

→ Signers must initial any changes that they or 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	Precinct # optional
Barbara M. Christensen	6/3/10	BARBARA CHRISTENSEN	759 Willow St Ashland 97520	
✓ Carol J. Volsin	6/8/10	CAROL VOLVIN	908 Fox St. Ashland 97520	
✓ Russ Chadick	6/8/10	RUSS CHADICK	1100 PARK ST ASHLAND 97520	
✓ Emile E. Cloutier, J.	6/8/10	EMILE E. CLOUTIER, J.	904 BARNWICK WAY	
✓ Cynthia Munroe	6/8/10	CYNTHIA MUNROE	562 FAIRVIEW ST. ASHLAND	
✓ JM Tomie Kendall	6.9.10	Tomie Kendall	548 Inn St Ashland or 97520	
✓ Julie Young	6/9/2010	Julie Young	240 W. Nevada St. Ashland OR 97520	
✓ Matt Christensen	6/9/10	Matt Christensen	759 Willow St. Ashland OR 97520	
✓ IL Alexis Christensen	6/9/10	Alexis Christensen	759 Willow St. Ashland OR 97520	
10				

Circulator Certification (This certification must be signed by the circulator)

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 individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. **Warning!** Falsely signing this statement 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)

Barbara Christensen 6-14-2010
 Circulator Signature Date Signed mm/dd/yy
BARBARA CHRISTENSEN 759 Willow St Ashland
 Printed Name of Circulator Circulator's Address street, city, zip code

County Elections Official Certification

I hereby certify 6 signatures on this petition are those of active registered voters in Jackson County, Oregon.

[Signature] 6-15-10
 Signature of County Elections Official Date Certified mm/dd/yy

09
 Sheet Number

Petition for Nonpartisan Nomination Signature Sheet

Petition ID 2010-01

One or More No Petition circulators will be paid (mark one)

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

Note to Candidate: Petition signatures must be verified before the petition can be filed with the filing officer. Submit the petition in ample time for the process to be completed before 5pm on the filing deadline day.

Candidate's Name <u>BARBARA CHRISTENSEN</u>	Office <u>CITY RECORDER</u>	District or Position Number if applicable <u>CITY of Ashland</u>
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To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next General election following the filing of this petition.

→ Signers must initial any changes that they or 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	Precinct # optional
<u>Barbara M. Christensen</u>	<u>6/3/10</u>	<u>BARBARA CHRISTENSEN</u>	<u>759 Willow St Ashland</u>	<u>97520</u>
<u>Jason Spear</u>	<u>6/3/10</u>	<u>JASON SPEAR</u>	<u>P.O. Box 609 Ashland</u>	<u>97520</u>
<u>Elizabeth Zinser</u>	<u>6/3/10</u>	<u>ELIZABETH ZINSER</u>	<u>850 Clarence Lane Ashland</u>	
<u>Kasia Palmarini</u>	<u>6/3/10</u>	<u>Kasia Palmarini</u>	<u>25 Granite St, Ashland</u>	
<u>Carolyn S. Hald</u>	<u>6/7/10</u>	<u>Carolyn S. Hald</u>	<u>275 Cambridge Ashland</u>	
<u>Russell E. Johnson</u>	<u>6/7/10</u>	<u>RUSSELL E. JOHNSON</u>	<u>758 Willow St, Ashland</u>	
<u>Dana T. Johnson</u>	<u>6/7/10</u>	<u>Dana T. Johnson</u>	<u>758 Willow St. Ashland</u>	
<u>Brian L. Almquist</u>	<u>6/7/10</u>	<u>BRIAN L. ALMQUIST</u>	<u>151 SUSAN LAUB</u>	<u>4</u>
<u>Saudia Sharkey</u>	<u>6/7/10</u>	<u>SAUDIA SHARKEY</u>	<u>654 PARK ASHLAND,</u>	<u>97520</u>
<u>Larry Christensen</u>	<u>6/7/10</u>	<u>LARRY CHRISTENSEN</u>	<u>759 Willow St. Ashland</u>	<u>97520</u>

Circulator Certification (this certification must be signed by the circulator)

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 individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. **Warning!** Falsely signing this statement 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)

Barbara Christensen 6/14/2010
 Circulator Signature Date Signed mm/dd/yy
BARBARA CHRISTENSEN 759 Willow St Ashland
 Printed Name of Circulator Circulator's Address street, city, zip code

County Elections Official Certification

I hereby certify 9 signatures on this petition are those of active registered voters in Jackson County, Oregon.
[Signature] 6-15-10
 Signature of County Elections Official Date Certified mm/dd/yy

02
 Sheet Number

Petition for Nonpartisan Nomination Signature Sheet

Petition ID 2010-01

One or More No Petition circulators will be paid (mark one)

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

Note to Candidate: Petition signatures must be verified before the petition can be filed with the filing officer. Submit the petition in ample time for the process to be completed before 5pm on the filing deadline day.

Candidate's Name <u>BARBARA Christensen</u>	Office <u>City Recorder</u>	District or Position Number if applicable <u>City of Ashland</u>
--	--------------------------------	---

To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next General election following the filing of this petition.

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

✓
INV

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code	Precinct # optional
<u>[Signature]</u>	<u>June 23, '10</u>	<u>Eden Sharkey Jacoby</u>	<u>657 Park st. Ashland, OR 97520</u>	
<u>[Signature]</u>	<u>6/23/10</u>	<u>AARON LEWIS</u>	<u>6070 A ST Ashland, OR 97520</u>	
<u>[Signature]</u>	<u>6-24-10</u>	<u>TERESA L. CONTRERAS</u>	<u>340 Oxford St, Ashon 97520</u>	
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Circulator Certification (This certification must be signed by the circulator)

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 individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. **Warning!** Falsely signing this statement 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)

[Signature]
Circulator Signature
BARBARA CHRISTENSEN
Printed Name of Circulator

6/24/10
Date Signed mm/dd/yy

759 Weldon St Ashland OR
Circulator's Address street, city, zip code

County Elections Official Certification

I hereby certify 2 signatures on this petition are those of active registered voters in Jackson County, Oregon.

[Signature]
Signature of County Elections Official

6-25-10
Date Certified mm/dd/yy

Sheet Number