Filing Dates	Candidate	Filing	State Vol	ers' Pamphlet	t	Car	didate Withdrawal
Primary Election May 20, 2014			·····	ronically using		1	
First Day to File Last Day to File	September March 11, 2		January 2 March 13	0, 2014	UNLOTAN	Mar	ch 14, 2014
General Election November 4,	2014		-	,		wich	0114,2014
First Day to File	June 4, 201	14	July 7, 20	14			
Last Day to File	August 26,		August 26			Aug	ust 29, 2014
All information must be co	mpleted or the form	will be rejec	ted.				
This filing is an	🔀 Orig	linal			Amendme	nt	
Filing Officer							
Secretary of State	🗌 Cou	Inty Election	s Official	X	City Reco	rder (Au	ditor)
Candidate Information							
Name of Candidate							
First	MI	Loct			······	T	·····
Pamela	1					Suffix	Title
iumein	Burkha	ider	Tuen	er			
How you would like your name	to appear on the ba	llot					
First	MI	Last			······································	Suffix	
Pamela	Burkholo	ler-	Turr	ner-			
Candidate Residence/Route Ad	dress						
Street Address	City			State	Zip	1	County
	Ask	nland		OR	่ จ้าระ		
		nana		<u> </u>	+ /Ja	<i>i</i>	<b>JACKSON</b>
Candidate Mailing Address	·····						
Street Address or PO Box	City			State	Zip		
PO Box 1299	Ask	NAND		OR	่ จา	520	
Contact Information: Only on	e phone number is re	quired.					
Work Phone	Home Phone		Cell Phone	<u> </u>	Fax	,	
541-552-2395					1.42		
Email Address			Web Site, if	applicable			
pam for judge @	aol.com			аррноавно			
Paying by Declaration or Pet	tition:						
Declaration, with the required f	iee	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
Office	Filing Fee	Office			Filip	g Fee	······
United States President	n/a	District Atto	mev		\$50	9,00	
United States Vice President	n/a			•			
United States Senator	\$150		tive Officer, N	AD Director	\$50 \$100	)	
United States Representative	\$100	MSD Counc	ilor		\$25	-	
Statewide Offices	\$100	County Offic	e		\$50		
State senator or Representative Circuit Court Judge	\$25 \$50	City Office			Set I	by charte	r or ordinance
en our oour oudge	\$50	Justice of th	e Peace		n/a		
X Prospective Petition			Petition	circulators will I		☐ Yes	52 Ma

Office Information				
Filing for Office of:	phland Municipa	2l Judge	2	
District, Position or County	·			
Party Affiliation:	Democratic Party	Rep	oublican Party 🔀 Nonpa	artisan
Incumbent Judge:	🔀 Yes	No No		sclosure on file
Occupation (present a				
	mployment) If no relevant e			
Hshland Mi	unicipal Judge	, 2007-	present	
Occupational Backgro	und (previous employment	) If no relevant o	experience, None or NA must I	pe entered.
ttshland Municia	al Judge Pontson 19	187-2100/2	orney rney, Dept. of Pesticic Uficer	
Educational Backgrou	nd (schools attended) If no	relevant experie	ence, None or NA must be ente	ared
Complete name of School	(no acronyms) a last G	rade completed	Diploma/Degree/Certificate	Course of Study
beorge washington	Iniv. Law center 3	YEars	J.D. with honors	LAW
Smith Collea	Q 4	years	B.A.	AmericanStud
brimsley SR. Hig	n, Greenshoro, N.C.	YEACS	H.S. Diploma	High School
		0	1	
Educational Background (	other) Attach a separate sheet if	necessary.		
Ashland Mun Ashland Mun	icipal Judge, Dr	007-top o Tenc, 199	ant experience, None or NA m Moint: 37-2006	
Candidate Committee → Yes, I have a candidate → No, I do not expect to s records of all campaign the requirements detaile	pend more than \$750 or receive	more than \$750 c tions or total expe	luring each calendar year. I under Inditures exceed \$750 during a ca	stand I must still keep lendar year, I must follow
<ul> <li>→ I will qualify for said of all information provid</li> <li>→ all information provid</li> <li>→ no circulators will be</li> <li>For Major Political Party</li> <li>→ if not nominated, I will</li> <li>→ I have been a member the deadline for filing</li> <li>Warning</li> </ul>	nation for the office indicated ab office if elected ed by me on this form is true to to compensated based on the num <b>Candidates</b> I not accept the nomination or electer of said political party, subject a nominating petition or declara	he best of my kno ber of signatures ndorsement of any to the exceptions tion of candidacy	obtained by the circulator on a pro y political party other than the one stated in ORS 249 046, for at lease	named t 180 days before
to 5 years. (URS	200./15). A person may only fill	e for one lucrative from the first filing	office or not more than one precir , all filings are invalid.(ORS 249.0	oct committee person at the

Panula Bi	ukloeden un Fill	6.414
Candidate's Signatur	2014	Date Signed
For Office Use Only	InitialsBY!	

# CERTIFICATE FOR VOLUNTARY CONTRIBUTION & SPENDING LIMITS CITY OF ASHLAND AMC 2.41

PLEASE TYPE O	<b>R PRINT LEGIBL'</b>	Y IN BLACK INK

🔀 Candidate 🗌 Political Committee	Primary 20	General 20 <u>14</u>	Other Election Date		
Candidate or Political Committee Name			Committee Identification Number		
Pamela Burkholder Tuen	er				
Treasurer's Full Name			Telephone Number (day)		
Pamela Burkholdor Turr	121-				
Address (street or route city state zin code)	nland, UR. 97520	(MAILING : P.	0. Box 1299, Ashland, OC 97520		
Ashland Municipal Jud		~			
I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of \$3,352.00 (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 \$3,352.00.					
Candidate or treasurer's signature	Date	e Signed			
[NOTE: If the candidate or committee treasurer elec above.]	ts NOT to be bound by the expen	diture limitations, the f	ollowing 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.			
Pamela Buckholden Jure		e Signed 6.4.14			
Candidate or treasurer's signature	Date				
The City Recorder is authorized to publish a statement expenditures. If the City Recorder or the City Attorney finds that a can the applicable expenditure limit, at the next election at v Recorder shall publish a statement, in the City, indicatir	didate filing a declaration of limitat vhich the candidate is a candidate	ion on expenditures has for election to public offic	exceeded		

# CITY OF ASHLAND

June 5, 2014

Pamela Burkholder Turner PO Box 1299 Ashland OR 97520

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

Petition ID MJ-1 has been approved for circulation to obtain the required 25 signatures for this position. Deadline to submit petitions to the Election Officer is August 21, 2014.

Irbara Aristenser

Barbara Christensen City Recorder



Fax: 541-552-2059 TTY: 800-735-2900



# ASHLAND

June 9, 2014

Pamela Burkholder Turner PO Box 1299 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 of Ashland Municipal Judge.

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

brura Mustensen

Barbara Christensen City Recorder/Treasurer

CITY RECORDER/TREASURER Tel: 541-488-5307 20 E Main Street Ashland, Oregon 97520 www.ashland.or.us

Fax: 541-552-2059 TTY: 800-735-2900



# **Petition Submission**

### Candidate, Voters' Pamphlet

This form must be completed and filed with each submittal of signatures.

Filing Officer					
State		County for both count	y and district petition	ns 🔳 City	
Election Type			Year		
Primary	] General	Special Election	2014	2016	2018
Petition Information					
Candidate Name or Mea	sure Number	· · · · · · · · · · · · · · · · · · ·			
Pamela Burkh	older Turne	ər			
Type of Filing	·		Number of Sig	natures Submitted	
Candidate Nominatin	g Petition		46		
Voters' Pamphlet, Ca	ndidate				
Voters' Pamphlet, Mo	easure				
Candidate				••••	
ightarrow By signing this documen	t, I hereby state that a	Il information on the for	m is true and correct	to the best of my knowle	dge.
Name Pamela Burkt Signature Canula Bur	rolder Tuend	Contact Phone 27 541-601	- 7505	Email Address	judge Oarl. con
Signature				Date Signed	
CanelaBu	kholau:	Juner		6.9.14	
Measure Argument Fi	ler				
ightarrow By signing this documen	t, I hereby state that a	ll information on the for	m is true and correct	to the best of my knowle	dge.
Name		Contact Phone		Email Address	
Signature				Date Signed	

DECEIVE JUN 9 2014 BY:---

# Petition Processing Statistics Report Date : 6/9/2014 10:27:36 AM

Number :2014Ash-01 Title :City of Ashland Municipal Judge

#### Petition Information

Petition Name :	City of Ashland Municipal Judge			
Petition Date :	06/05/2014	Date Filed :	06/05/2014	
End Circulation Date :	06/07/2014			
Minimum Signatures Required :	25	Accepted Of Minimum : ( 3	184.00%)	
Total Signatures Processed :	49			
			· · · · · · · · · · · · · · · · · · ·	

	Processing Summary	Sample: All	
Total Accepted Signatures	<b>:</b> 46	(94%)	Of Those Processed
Total Rejected Signatures	: 3	(6%)	Of Those Processed
Accepted Reason		Total	(% Rejected)
Valid Signature		46	(100%)
Rejected Reason		Total	(% Rejected)
Not Registered		1	(33.3%)
Out of District		2	(66.6%)

٦

Signatures for this petition are being gathered by

Petition ID MJ-1

PAID Circulators This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

**VOLUNTEER Circulators** 

Jackson County

( i) 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.

Candidate Information	
Name	Office
Pamela Burkholder Turner	Municipal Judge
Election	District or Position Number
2014 General Election	City of Ashland

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
1	Ponela Bucklolder Ju	ever 6/5/14	Pameta Burkholder Tur	ner P.O. Box 1299, Ashland, OR
~	DawnCaldwell	6-5-14	DamCaldwill	914 KESTELPGrKWan, Ashkmd,
	THE TRACES	HELER CA	Set	OR
		06-05-14	+ CHRISTIAN E.H.	EARN 350 WIMER ST. ASHLAND
-5	Dauch Bable		Darvell Bowy	1900 TAMARACIC R., NOHLANDR
-6	Shanne & Dichus	6-5-14	Julianne DiChiro	635 Wella-Lane, Ashland, OR 97520
	Que Friend	1 .	Studya Friend	965 Pinecress Ter Adulard 97520
	Lasa Masself-Mel	6/5/14	Lisa Massell-Molnar	
	Hilli Morle			WLON 932 This ble porty Lar Ashland ASO
	they all	6.5/14	Tel Alerada	1920 Creen Madow 5 Artiland Od
-10		<u> </u>	JUNN AUCHARACT	the there can be a work 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 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** 

G. 5. 14 Date Signed mm/dd/yy

Sheet Number Sheet will be numbered by group submitting the

petition.

laor Tunner

**Printed Name of Circulator** SEL 121 rev 01/14 ORS 249.072

Circulator's Address street, city, zip code County Elections Officials provide a separate certification to attach to the petition.

Ashland Or 97520

Signatures for this petition are being gathered by

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Jackson County

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Name	Office			
Pamela Burkholder Turner	Municipal Judge			
Election	District or Position Number			
2014 General Election	City of Ashland			

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Şignature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
AMCHAMMA MAT	06/05/14	BENCE M. AUBACT	1411 Parsers De Astron CR 97520
12 herrow	06/05/14	TIMOTHY SIMONSEY	1133 Beswick Way, Ashland CR
OV 3 Kathland H Coper	06/05/14	Kathleen G. H. Cooper	1182 Timberline Terrice Ashlowlock
1 John Kaine	06/05/14	JOHN KARUS	HYP WILEY ST. ASHLAND SUD
~ Karen to	06/05/14	Kaven Hinavitico	
16 Millound	06/05/14	Endre Amarona	195 RANDY ST ACHLANDOR 97520
- Moedfuiding	6/05/14	Mary Gardiner	349 Qrange Ave Achland
s Alex Alexan	6/5/14	ALAN HARPOR	651 Walnut Jt, Ashid 976
" Mainen & The 2	6/5/14	Merwan Richards	590 Grandinew Drive Ashlandon
10 Kathleen n.	4/5/14	Kathleen Mackvis	590 Grandijew Drive Ashlandine 549 Hilison Ashkend

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6.5.14

**Circulator Signature** 

Date Signed mm/dd/vy

oldor Turnor POBox 1299, Ashland, M97520

Sheet Number Sheet will be numbered by group submitting the petition.

**Printed Name of Circulator** SEL 121 rev 01/14 ORS 249.072

Circulator's Address street, city, zip code County Elections Officials provide a separate certification to attach to the petition.

Signatures for this petition are being gathered by

**VOLUNTEER** Circulators

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<sub>county</sub> Jackson

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Candidate Information		
Name	Office	
Pamela Burkholder Turner	Municipal Judge	
Election	District or Position Number	
2014 General Election	City of Ashland	

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Signatore (	Date Signed mm/dd/yy	Print Name	Residence or Mailing Addres	s street, city, zip code
-1 Under allay	06/05/14	Sandra Slattery	1405 Pinecrest 7	Errace; Ashland, OR
Sheile M Cloch	06/05/14	Sheila Clough	692 VanSant St.	Ashland, or
3 Karen DeBan	6/5/19	KAREN DeBoer	234 Vista	ashland, Or
" Sugar O Cain	6/5/14	SUSAN OCAIN	263 Granite	St Astrandon
Male	4/5/14	DEEAnns Exerson	467 Willianson Way	Ashland OR
15 Hard Lichelle O	6/5/14	Michelle Zundel	107 Granite St.	Ashland OR
1 Aprile	6/5/14	Cynthia Schen	325 Scenie Dr 1	Ashland OR
8	elslig	Subscy T. BROLD	117 ALMAND St.	ASMIMIA OR 9750
Malur Krouzmal	( 6/5/14	Molly P. Kreuzma	ru 1030 Morton	St Ashland OR
-10 como Dech	4/5/14	Amy L. Belkin	1484 Windson St	
Circulator Certification This certification mu	st be completed by the circul	lator and additional signatures should not be o	collected on this sheet once the certification	n has been signed and 97520
dated! I hereby certify that I witnessed the signing of the getition (ORS 249.061). I also hereby certify that c	signature sheet by each indi	vidual whose signature appears on the signature, was not based on the number of signatures	are sheet, and I believe each person is a vot s obtained for this petition.	er qualified to sign the
Camela Buckhalder J	uner	6-5.14		
Circulator Signature		Date Signed mm/dd/yy		Sheet Number
Pamela Burkholder Ti	unne/	PO Box 1299 Ash/1	two, or 97520	Sheet will be numbered by group submitting the petition.

**Printed Name of Circulator** SEL 121 rev 01/14 ORS 249.072

Circulator's Address street, city, zip code County Elections Officials provide a separate certification to attach to the petition. Petition ID MJ-1

Signatures for this petition are being gathered by

#### **VOLUNTEER Circulators**

Petition ID MJ-1

**PAID Circulators** 

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Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. (**i**)

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Candidate Information		·
Name	Office	
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Election	District or Position Number	
2014 General Election	City of Ashland	

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Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
milich Joanhant	6/5/14	JulieLockhart	668 Glendale Ashland OR
Elisabethe a. Zim	un 6/5/14	ELISABETHA. ZIN	ser 850 Clarence Lane Ash
- anne She	6-5-2014	Anne Golden	247 N. 321. St. Ashland Or.
00 + Dereice Mere		Deneice Zeve	
is DE		Jennifer Joss	459 Briscoe Place Aphland
16 LAL	61514	LINDA Ganim	570 Tanka St Asthens OR
~ Antiger alle	6/5/14-	Barbara Allen	200 Helman St. Ashland or 27520
- B X VA	6/5/14	RORED	MERANITE FHLAND M
	65.14	SusAn heid	171 Grante Ashlum (97520
An	6-6-14	Joim P. DELEDIO	, MIS 373 COURTIE, ASTERNOR

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.

ukboldu:

**Circulator Signature** 

66.14 Date Signed mm/dd/yy

Buckholder Turner tamela

POBox 1299, Ashland, OK 97520

Sheet Number Sheet will be numbered by group submitting the petition.

**Printed Name of Circulator** SEL 121 rev 01/14 ORS 249.072

Circulator's Address street, city, zip code County Elections Officials provide a separate certification to attach to the petition.

Jackson County

Signatures for this petition are being gathered by

PAID Circulators

#### VOLUNTEER Circulators

Petition ID MJ-1

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Name	Office
Pamela Burkholder Turner	Municipal Judge
Election	District or Position Number
2014 General Election	City of Ashland

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Using 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 Xhan 6 V~	6/2/14	Yine cary van bla	271 Morton Ashhd,
2 Beck Cal	RA 6/7/14	Becky Cook	226 Van New Ale. Ashland or de
3 Sharent	05Kps 10-7-14	I Bla Jula	1420 Fielder St Ash Or
- Alik A	~ 6-7-TLJ	Aleha Stiers	1120 Emmin ST. ASHLAND
-5 Cd.	6.7-14	Cassandra loeus	1258 Rose Lo. Ashland
· Elinabet fr	rdul 6/07/14	Elizabeth Pischel	1355 Romes Th. "Ishand, OR
F. Ronnie Ho	Asten 6/1/14	BONNIE Holdein	750 Dak Groll Dr. Ashland, DR
	aule 6/7/14	Jo WAYLES	505 Fairvien Ashlad or
-9 Annam	ntile. 6/7/14	Amy MILLER	244 Mendow DR. Ashbal
10 Rot	F. N (0.7.14	KG SHIES	2520 Spruchel Dr Andered
Circulator Certification This	certification must be completed by the crculator	and additional signatures should not be collected on	

dated!

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 $a\gamma$ 

**Circulator Signature** 

Date Signed mm/dd/vy

6.7.14

Sor kholder Tunner Pamela

**Sheet Number** Sheet will be numbered by group submitting the petition.

**Printed Name of Circulator** SEL 121 rev 01/14 ORS 249.072

Circulator's Address street, city, zip code County Elections Officials provide a separate certification to attach to the petition.

P.O. Box 1299 Ashland Or 97520

<sub>county</sub> Jackson