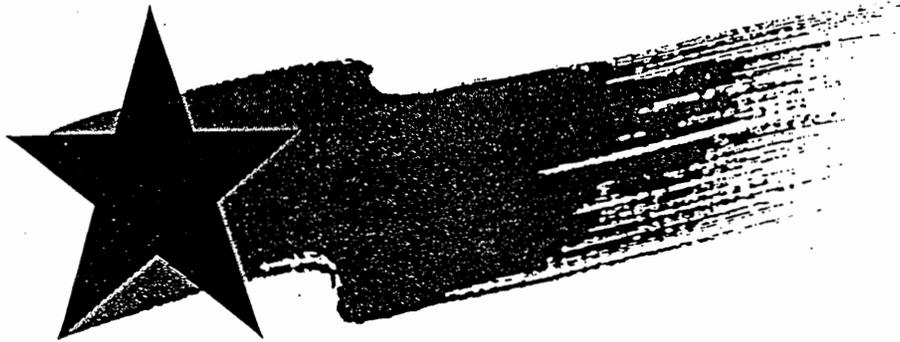


**MEASURE ARGUMENT
INSTRUCTIONS AND
FILING FORMS**



**FOR
LINCOLN COUNTY
VOTERS' PAMPHLET**

ARGUMENT STATEMENT FOR COUNTY VOTERS' PAMPHLET

Ballot Title Caption: _____

Measure Number: _____ Word Total (325 Maximum): _____

Argument In Favor

Argument In Opposition

Person responsible for the content of the ARGUMENT STATEMENT:

(TYPED) _____

(SIGNED) **X** _____

Name of the Organization person represents, if any

LINCOLN COUNTY

PETITION FOR ARGUMENT: () FOR () AGAINST BALLOT MEASURE NO. _____

Petition I.D. _____

SIGNATURE SHEET

To Lincoln County Clerk: We, the undersigned, request that the attached argument be printed in the Lincoln County Voters' Pamphlet. By our signature, we certify that we have read the argument, that we subscribe thereto and that each of us is a registered voter eligible to vote on the measure.

(Insert Ballot Title) _____

(ORS 251.255)

	SIGNATURE	Date Signed Month/Day/Year	PRINT NAME	Residence Address Street and Number	City or Post Office	Zip Code	Precinct (if known)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							

SHEET NUMBER _____
RES 024 (1/10/94)

STATE OF OREGON, COUNTY OF LINCOLN, I, _____

certify that every person who signed this sheet did so in my presence and I believe that each is an elector.

Signature of Person Filing Argument: _____ Address: _____

Name of organization represented (if any): _____

I hereby certify that _____ signatures on this petition are those of electors. _____

County Clerk or Deputy

Date: _____ ; Lincoln County (ORS 249.732)

STATEMENT OF ENDORSEMENT

I, _____ consent to the
(PRINTED NAME OF INDIVIDUAL OR ORGANIZATION BEING USED)

use of my name or the name of the organization I am authorized to represent in
the _____ county voters' pamphlet statement submitted by the following:

(PRINTED NAME OF CANDIDATE OR BALLOT MEASURE STATEMENT USING ENDORSEMENT)

In Support Of In Opposition To

Ballot Measure Number: _____

At the _____ Election, 20____.
(INDICATE APPLICABLE ELECTION)

Dated on this _____ day of _____, 20____ by

X

Signature of Individual*

Name of the Organization person represents, if any

* Oregon law specifies that a person shall not submit a false signature (ORS 251.405).

EXPLANATORY STATEMENT FOR COUNTY VOTERS' PAMPHLET

Ballot Title Caption: _____

Measure Number: _____ Word Total (500 Maximum): _____

Person responsible for the content of the Explanatory Statement:

(TYPED) _____

(SIGNED) **X** _____

Name of the Governing Body person represents