



Return this form to: Lincoln County Board of Commissioners  
225 West Olive Street, Room 110  
Newport, OR 97365  
(Email: [cmiller@co.lincoln.or.us](mailto:cmiller@co.lincoln.or.us))

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My term as a member of the \_\_\_\_\_ special road district board is soon to expire (or has expired).

- I would like to be reappointed to another term as a member of this special road district board.
- I no longer wish to serve as a member of this special road district board.

Signed:

\_\_\_\_\_

Name: \_\_\_\_\_

(Please print)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_

Phone No. \_\_\_\_\_

E-mail \_\_\_\_\_

***CURRENTLY SERVING BOARD MEMBERS:***

*I recommend the reappointment of the above board member to our road district board.*

\_\_\_\_\_  
BOARD MEMBER

\_\_\_\_\_  
BOARD MEMBER

OR

*I do not recommend the reappointment of the above board member.*

\_\_\_\_\_  
BOARD MEMBER

\_\_\_\_\_  
BOARD MEMBER