

Petition Submission

Candidate, Voters' Pamphlet

SEL 338rev 01/14
OAR 165-010-0005, 165-014-0005

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

Filing Officer

☐ State ☐ County for both county and district petitions ☒ City

Election Type**Year**

☒ Primary ☐ General ☐ Special Election ☐ 2014 ☐ 2016 ☒ 2018

Petition Information**Candidate Name or Measure Number**

Julia DeGraw

Type of Filing**Number of Signatures Submitted**

☒ Candidate Nominating Petition

PDX 01

154

☐ Voters' Pamphlet, Candidate

☐ Voters' Pamphlet, Measure

Candidate

Julia B DeGraw

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

Name

Julia B DeGraw

Contact Phone

503 347 3599

Email Address

jul@julia4pdx.com

Signature

Julia B DeGraw

Date Signed

11/20/17

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**