**NOMINATING PETITION**

**MEDFORD IRRIGATION DISTRICT**

**Note:** The Medford Irrigation District has been subdivided into five Divisions. Each Division is represented on the Board of directors of the district by one Director of Medford Irrigation district for a three-year term. Each Director must be a resident of Oregon and either a bona fide owner of land or a shareholder of a bona fide corporate owner of land situated in the Division that he or she represents. Directors may be nominated only by qualified electors within that Director’s Division (at least 10 electors). A qualified elector is a person who meets the voting requirements for age, residency, and registration and who has the present right to vote in an election. If an elector is an owner in two or more Divisions and resides in one of them, the elector shall vote in the Division of residence. If an elector is a nonresident of the district, the elector may choose to vote in any one Division in which the elector is an owner of the land. However, when a nonresident landowner chooses to vote in any one Division, the landowner must make an irrevocable election to vote in that Division and remains irrevocable until the nonresident landowners’ ownership status changes in any way or until the nonresident landowner become a resident owner. By signing the following Nominating Petition, you are certifying to the Medford Irrigation district that you are a landowner in the Division noted and that you are qualified to vote in that Division.

To Jack Friend, Secretary of the Medford Irrigation District of Jackson County, Oregon.

 We, the undersigned, duly qualified electors and owners of land within the boundaries of Division \_\_\_\_\_\_\_

of the Medford Irrigation District, Jackson County, Oregon, do hereby certify that we are qualified to vote in said Division, and we he hereby nominate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the office of Director of Division \_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the Medford Irrigation District.

 We respectfully pray that his/her name be placed upon the ballot at the election to be held by Medford Irrigation district upon the \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_.

 We hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a resident of the State of Oregon, and either a bona fide owner of land or a shareholder of a bona fide corporate owner of land situated withing the boundaries of Division \_\_\_\_\_\_\_\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has agreed to accept the nomination and if elected, serve in that position as Director of Medford Irrigation District for a three-year term.

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|  | **Name: (print clearly)** | **Address:** | **Signature:** |
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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am willing to accept the nomination and if elected, serve in the elected position as Director of Medford Irrigation District for a three-term, to the best of my ability.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Candidate

 (signature)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (address)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am personally acquainted with all people who have signed the foregoing petition and personally know that their signatures are genuine; that their post office addresses are correctly stated, and that I believe they are duly qualified electors and owners of land situated within the boundaries of Medford Irrigation District of Jackson County, Oregon.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Petition Circulator

 (signature)

STATE OF OREGON )

 ) SS

County of Jackson )

Signed and sworn to (or affirmed) before me on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public of Oregon

 My Commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_