

**Prospective Petition**  
**Local Initiative and Referendum**

*City of Beaverton*  
*Received 12-17-2018*  
*C. Jansen, City Recorder*

**SEL 370**

rev 01/18 ORS 250.045,  
 250.165, 250.265, 255.135

**Warning** Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,000 and/or prison for up to 5 years. Each chief petitioner is required to provide, on the same form, their name, residence address, a contact phone number and a signature attesting that the information on the form is true and correct. Changes to the information provided for a chief petitioner or to the circulator pay status below must be reported to the Elections Division no later than the 10th day after you first have knowledge or should have had knowledge of the change.

Petition Information		Type		
This filing is an	<input type="checkbox"/> Original	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Initiative	<input type="checkbox"/> Referendum

Jurisdiction			Some Circulators may be Paid	
<input type="checkbox"/> County	<input checked="" type="checkbox"/> City	<input type="checkbox"/> District	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Title** Subject or name you give your petition.  
 Instant Runoff Voting for Beaverton

**Website** if applicable

**Petition Correspondence** Select the method of receiving notices or other correspondence from the Filing Officer.

Correspondence Recipient       Email Chief Petitioners       Mail Chief Petitioners

**Recipient Information**

Name	Email Address

**Chief Petitioner Information** At least one original chief petitioner must remain throughout the petition process or the petition is void.

→ By signing this document, I hereby state that all information on the form is true and correct and attest that no circulators will be compensated money or other valuable consideration on this petition based on the number of signatures obtained by the circulator.

<b>Name</b> Farrah Chaichi	<b>Contact Phone</b> 503-451-0162
<b>Residence Address</b> street, city, state, zip 1187 SW Kiley Way #36	
<b>Mailing Address</b> if different	<b>Email Address</b> fnchaichi@gmail.com
<b>Signature</b> <i>Farrah Chaichi</i>	<b>Date Signed</b> 12/12/18

<b>Name</b> Keith Haxton	<b>Contact Phone</b> 503-451-0162
<b>Residence Address</b> street, city, state, zip 1187 SW Kiley Way #36	
<b>Mailing Address</b> if different	<b>Email Address</b> keithmhaxton@gmail.com
<b>Signature</b> <i>Keith Haxton</i>	<b>Date Signed</b> 12/13/2018

<b>Name</b>	<b>Contact Phone</b>
<b>Residence Address</b> street, city, state, zip	
<b>Mailing Address</b> if different	<b>Email Address</b>
<b>Signature</b>	<b>Date Signed</b>