Prospective Petition

Recall

SEL 350

rev 01/22 ORS 249.865

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. Changes to the information provided for the chief petitioner or to the circulator pay status below must be reported to the elections official no later than the 10th day after you first have knowledge or should have had knowledge of the change.	
This filing is an: Original	Amendment
Filing Officer	
State County for both county ar	nd district offices City
Some Circulators may be Paid	
☐ Yes ■ No	
Petition for Recall of Provide the name of the public off	ficer and the position that they currently hold.
Name of Public Officer	Title of Public Officer
Ron Hedenskog	Mayor of Brookings
Statement Provide the reasons for demanding recall in 20	00 words or less. Any factual information provided must be true.
officers, former and current City Councilors charge of the City's finances. Against strong Howard as City Manager, with whom he has arrest and theft conviction for shoplifting at Hedenskog has seriously compromised the Mayor cannot in good faith move forward a represents. Ron Hedenskog has broken the hard-earned taxpayer dollars in legal fees, excessive amount of non-transparent, out-Brookings deserves a mayor who is transvoice of the people. Hedenskog has failed	
	st remain throughout the petition process or the petition is void.
By signing this document, I hereby state that any fac	ctual information (not a matter of opinion) in the above statement is true.
Name Dennis Triglia	Contact Phone 503-703-6613
Residence Address street, city, state, zip 96359 Dawson Road; Brookings, OF	R 97415
Mailing Address if different	Email Address trigliad@yahoo.com
Signature Omnia Hisialia	Date Signed

RECEIVED

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