Statement of Justification

SEL 352

Public Officer

rev 01/18 ORS 249-877

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. This statement must be submitted no later than 5 days after the filing officer determines the recall petition contains sufficient signatures.

Filing Officer			The Year of
State	County	for both county and district offices City	
Public Officer Informatio	n	Market of English to a	
Name Smart Ocholi		Contact Phon 503-954	
Residence Address street, cit 13494 SW Fisc		City, OR 97224	
Mailing Address if different		Email Address Socholi@	; gci.king-city.or.us
Statement Provide a statement	of justification of term in office in 20	00 words or less.	
and development serving on counce community roles As a volunteer covoices and perspectars, we've account improvement improvement is unreasor King City. Vote Nove King City, a family here. This honorably, and to every day. Pleas	t, and be respond cil, I served on the council, we have vectives of our recomplished a lot, at, improved stored to address our hable and harmful on this recall. and my wife and is our home, and e vote NO on the	I are blessed to live here and my only goal is to serve resality of life in King City is bette recall election.	addition to and in other direflect the uch. Over the grant funds, I sidewalks, This recall he current/futured raise our spectfully and er for all of us
y signing this document I h	ereby certify that the inform	nation in the above statement of justification is to	rue.
		Smart Ocholi	1/8/2024
1		Date Signed	
or Office Use Only	Initials	Date and Time Stamped	