

Vote by Mail Challenge Form

SEL 535

rev 09/19
ORS 254.415

Complete this form to challenge the ballot of a person you know or suspect is not qualified to be an Oregon voter. You cannot file a challenge once the ballot is removed from its return envelope.

Provide the reasons why you believe the person is not qualified to be an Oregon voter. You must swear or affirm a statement of facts upon which the challenge is based. Only sign this form in the presence of a county elections official.

This filing is made by: Elections Official Oregon Registered Voter

Challenge Information	
Precinct Number	Challenge Number

Challenger	
Name	Contact Phone
Address	

Person Being Challenged
Name

Statement of Facts
The person named above is challenged as a qualified voter for the following reason(s):

Oath of Challenger
Signature

County Elections Official	
Subscribed and affirmed before me on this day by the challenger named above:	
Date	Signature