



Ballot Measure Cover Sheet

A completed cover sheet **must** accompany each ballot measure submitted to the Whatcom County Auditor. **It is the submitter's responsibility to ensure that requested documentation is presented no later than the resolution deadline date.**

This form is available in a fillable form on the Auditor's website: www.whatcomcounty.us/auditor.

District Information

District Name: _____

District Address: _____

Contact Person 1

Name & Title

Phone & email

Contact Person 2

Name & Title

Phone & email

Attorney Information

Name

Phone & email

Has your attorney prepared this ballot measure?

Yes No

Have You:

Attached the Resolution with original signatures *or* a certified copy of the original Resolution? Yes No

Attached the Explanatory Statement (not to exceed 100 words) for the Local Voters' Pamphlet prepared by your attorney? Yes No

Attached the "For" and "Against" Committee Appointment Forms? Yes No

Completed this cover sheet? Yes No

Auditor's Office Use

Date Stamp

Missing document(s):

I understand that the submittal deadline date for the missing documents is _____ and the Auditor's Office will not begin processing this ballot measure until all documents have been submitted.

Deputy Auditor's Signature

Presenter's Signature