

Notice of Measure Election

City

SEL 802

rev 01/16 ORS 250.035, 250.041,
250.275, 250.285, 254.095, 254.465

Notice

Date of Notice January 22, 2018	Name of City or Cities City of Bend	Date of Election May 15, 2018
---	---	---

Final Ballot Title The following is the final ballot title of the measure to be submitted to the city's voters. The ballot title notice has been published and the ballot title challenge process has been completed.

Caption 10 words which reasonably identifies the subject of the measure.

Five-year operating levy for fire and emergency medical services.

Question 20 words which plainly phrases the chief purpose of the measure.

Should Bend issue a five-year local option operating levy of \$.20/\$1,000 assessed value for fire and emergency services beginning 2019?

This measure renews current local option taxes.

Summary 175 words which concisely and impartially summarizes the measure and its major effect.

The measure, if approved, would authorize the City of Bend to levy taxes to support the annual cost of fire and emergency medical services provided to Bend residents. The measure would provide for a local option operating levy at a rate of \$.20/\$1,000 of assessed value for five years, beginning July 1, 2019. Revenue from the levy would be used to maintain adequate staffing with the goal of assuring adequate response times.

The estimated revenue over five years is:

2019-2020: \$2,300,000
2020-2021: \$2,400,000
2021-2022: \$2,500,000
2022-2023: \$2,600,000
2023-2024: \$2,700,000

If the maximum levy is assessed, the estimated total revenue raised over five years would be approximately \$12,500,000.

The estimated revenue for this measure is an ESTIMATE ONLY based on the best information available at the time of estimate.

Explanatory Statement 500 words that impartially explains the measure and its effect.

If the county is producing a voters' pamphlet an explanatory statement must be drafted and attached to this form for:

→ any measure referred by the city governing body; or

→ any initiative or referendum, if required by local ordinance.

Explanatory Statement Attached? Yes No

Authorized City Official Not required to be notarized.

Name Robyn Christie	Title City Recorder
Mailing Address 710 NW Wall St, PO Box 431, Bend 97709	Contact Phone 541-388-5517

By signing this document:

→ I hereby state that I am authorized by the city to submit this Notice of Measure Election; and

→ I certify that notice of receipt of ballot title has been published and the ballot title challenge process for this measure completed.

Signature

January 22, 2018

Date Signed