Notice of Measure Election

District

SEL 803

rev 01/16 ORS 250 035, 250 041, 255 145, 255 345

Date of Notice	Name of District Administrative SD No. 1	Name of County or Counties Deschutes County	Date of Election May 16, 2017
Ballot Title Prepare with	n assistance from the district attorney or a	n attorney employed by the district.	
Caption 10 words which	reasonably identifies the subject of the me	easure.	
Bonds for New Scho	ols, Safety Improvements, Class	room Renovations and Preservat	iion
Question 20 words whic	ch plainly phrases the chief purpose of the	measure.	
general obligation bo	onds? If the bonds are approved,	assrooms, and improve safety by , they will be payable from taxes on ns 11 and 11b, Article XI of the O	on property or property
Summary 175 words wh	nich concisely and impartially summarizes t	the measure and its major effect.	
approved, this measure is expe	cted to fund the following capital project costs:		
anticipated capacity challenge - Maintenance and Preservation ventilation and lighting system - Classroom Additions and Mod the District, such as, Science, Tasafety and Technology Infrastive Make site improvements, purchal Combined with the expected decissuance. Explanatory Stateme	n to Extend the Life of Existing Buildings: Such as, rooms. ernization: Many facilities were constructed decade fechnology, Engineering, Arts and Mathematics learn ructure Improvements: Make safety and health upgrase land for future schools and related costs, pay bor rease in existing debt, estimated first-year cost is \$0	rades such as, entrance redesign, security systems and issuance costs and capitalized interest. 0.44 per \$1,000 of assessed value. These bonds woul	cluding more efficient heating, hish schools and other facilities within d fire and life safety modernization. d mature in 25 years or less from
→ any measure referred→ any initiative or reference	d by the district governing body; or rendum, if required by local ordinance.	Evalonatory Statement Attach	(1/22-02)
Authorized District O	fficial Not required to be notarized.		
Name Shay Mikalson		Title Superintendent	
Mailing Address		Contact Phone	
520 NW Wall Stree	t, Bend, OR 97703	541-355-1000	
By signing this documer → I hereby state that I a above ballot title is to	am authorized by the district elections	authority to submit this Notice of Mea	sure Election and I certify the

Date Signed