

# Filing of Candidacy for Special District Nomination

**SEL 190**

rev 01/10: ORS 255.235

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## Candidate Information

<b>Candidate Name</b>	<b>Filing for Office of</b>
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<b>How Name Should Appear on Ballot</b>	<b>District, Position or Zone Number</b> if applicable
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**Residence Address, Street/Route**

<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>County of Residence</b>
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<b>Home Phone</b>	<b>Work Phone</b>	<b>Cellular Phone</b>
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<b>Fax</b>	<b>Email Address</b>	<b>Date of Election</b>
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**Mailing Address** where all correspondence will be sent, **Street/Route**

<b>City</b>	<b>State</b>	<b>Zip Code</b>
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## Filing Information

- Filing of candidacy by declaration, with the required \$10.00 fee.
- Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors or at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials.

## Required Information (if no relevant information, list "none")

**Occupation** present employment – paid or unpaid

**Occupational Background** previous employment – paid or unpaid

## Educational Background

<b>Complete Name of School</b> no acronyms	<b>Last Grade Level Completed</b>	<b>Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)</b>	<b>Course of Study</b> optional
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Other:** \_\_\_\_\_

**Required Information** (if no relevant information, list "none")

**Prior Governmental Experience** elected or appointed

*By signing this document, I hereby state:*

- that I will qualify for said office if elected
- that all information provided by me on this form, including my occupation, educational and occupational background, **and** prior governmental experience, is true to the best of my knowledge

*Check the applicable box:*

- By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than \$350 or receive more than \$350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$350 during a calendar year, I must follow the requirements detailed in the *Campaign Finance Manual*.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the *Campaign Finance Manual*.

\_\_\_\_\_  
**Candidate's Signature**

\_\_\_\_\_  
**Date Signed**

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**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. (ORS 260.715) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013).

**For Office Use Only**

\_\_\_\_\_  
Initials

\_\_\_\_\_  
Cash or Check Number

\_\_\_\_\_  
Candidate ID Number

\_\_\_\_\_  
Receipt Number

\_\_\_\_\_  
Office Number

# Petition for Special District Nomination Signature Sheet

Petition ID \_\_\_\_\_

This is a candidate nominating petition. Signers of this page must be active registered voters in the following county: \_\_\_\_\_

Candidate's Name

District Name

Office

District, Position, Department or Zone Number if applicable

**To the County Elections Official,** We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next regular district election following the filing of this petition.

**Signature**

**Date Signed** mm/dd/yy

**Print Name**

**Residence or Mailing Address** street, city, zip code

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## County Elections Official Certification

I hereby certify \_\_\_\_\_ signatures on this petition are those of active registered voters in \_\_\_\_\_ name of district  
in \_\_\_\_\_ County, Oregon.

Signature of County Elections Official

Date Certified mm/dd/yy

Sheet Number