Candidate Filing SEL 190 District All information must be completed or the form will be rejected. This filing is an Original Amendment Office Information District, Position or County: Birch CR. Water Control Dist. Pos 4 **Filing Information** Filing with the required \$10.00 fee Prospective Petition **Candidate Information** Name of Candidate Suffix First M! Title Weinke How you would like your name to appear on the ballot **Candidate Residence/Route Address** Street Address 64450 EAST BINCH CR Rd PILOT ROCK OR 97868 Indidate Mailing Address and Contact Information: Only one phone number is required. Candidate Mailing Address and Contact Information: Only one phone number is required. City State Zip PIOTROCK OK 97868 Home Phone Cell Phone Fax 541 443 6841 Web Site, if applicable Street Address or PO Box **Email Address** Occupation (present employment) If no relevant experience, None or NA must be entered. NIA Occupational Background (previous employment) If no relevant experience, None or NA must be entered. NIA

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Dilot Rock High School	12		
Educational Background (other) Attach a separate	sheet if necessary.		
additional basis, out a formary retains a separate			
Prior Governmental Experience (elected or appo	inted) If no relevant expe	rience, None or NA must be ente	red.
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Campaign Finance Information (not applicable to	candidates for federal o	ffice)	
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2/09/202/ Date Signed

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