Candidate Filing District					SEL 190 rev 01/1 ORS 255.23
All information must be completed or the fo	orm will be rej	ected.			L. Sev
This filing is an X	Original		Amendme	nt	
Filing for Office of: Hoju Pacha & P	reccentin	n Board M	lember		
District, Position or County: Position					
Filing Information	5				
Filing with the required \$10.00 fee			·	<u> </u>	an a
Prospective Petition				······	
Candidate Information					
Name of Candidate					ансан — , , , , , , , , , , , , , , , , , ,
First . MI	Last	Herron		Suffix	Title
How you would like your name to appear on the	e ballot				
Candidate Residence/Route Address					
Street Address 219 Concord St.		Fity Helix		State	Zip 97835
Candidate Mailing Address and Contact Informa	tion: Only one	phone number is required	l.		
Street Address or PO Box		Helix		State	2ip 97835
Work Phone Home Phone		Cell Phone 541-215-26	Fax	¢	
Email Address Okherron I Soutlook.	com	Web Site, if applicabl			
Occupation (present employment) If no relevant	experience N	one or NA must be entered	d.		
substitute teachers aide w		and a start of the			
Occupational Background (previous employmen	t) If no releva	nt experience, None or NA	must be entered		
NA					

Educational Background (schools attended) If no relevant experien	ce, None or NA must be entered.
-------------------------------------------------------------------	---------------------------------

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
NA			
Educational Background (other) Attach a separa	te sheet if necessary.		

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Current Mayor of Helix Current board member for EUMAIAHD

Campaign Finance Information (not applicable to candidates for federal office)

Candidate Committee

Yes, I have a candidate committee.

No, I do not expect to spend more than \$750 or receive more than \$750 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.

No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

By signing this document, I hereby state that:

- → I will qualify for said office if elected
- → all information provided by me on this form is true to the best of my knowledge



ł

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). A person may only file for one lucrative office at the same election. (ORS 249.013 and ORS 249.170)

Date Signed

F # 3396 For Office Use Only Initials

Càndidate Filing District				azaz 12, 9283	SEL 190 rev 01/21 ORS 255.235
• This form must be filed with con	unty elections official. All inf	formation must be compl	eted or the form		cted.
2021 District Election Filing Dates					
Candidate Filing February 6, 2021 to	March 18, 2021	Withdrawal Date Mar	ch 18, 2021		
This filing is an	🕅 Original		Amendment	:	
Office Information					
Filing for Office of: Helix	Director Pos	reation Di	istrict		
District, Position or County:	Director Pos	ition I			
Filing Information					
Filing with the required \$10.00 fee	2				
Prospective Petition			week and a set of the spectrum of the set of		
Candidate Information					
Name of Candidate			· · · · · · · · · · · · · · · · · · ·		
First Shannon	MI Last	Peters		Suffix	
How you would like your name to ap	pear on the ballot				
Shannon	malum	Peters			
Candidate Residence/Route Address					
Street Address 79354 Kings	Corner Rd	Pendlep		State	Zip (9780)
Candidate Mailing Address and Cont	act Information: At least on	e phone number and ema	il address is requ	ired.	
Street Address or PO Box 79354 Kings	Womer Rd	City Pendletr	`	State	Zip 9780)
	me Phone	Cell Phone SU3-S60-S	SS20 Fax		
Email Address CSPEters 25 @ 9	mail. com	Web Site, if applicable			
Race and Ethnicity Optional					
Occupation (present employment) If	no relevant experience. Nor	ne or NA must be entered.			
EdgeLink, LLC	terrent to the state of the sta				
Occupational Background (previous	employment) If no relevant	experience, None or NA m	nust be entered.		
NA					
	·				

Educational Background (schools attended) If no relevant experience, None or NA must be entered. Complete name of School (no acronyms) Last Grade completed Diploma/Degree/Certificate Course of Study Linfield Coll-ege Senior BA degree but in ess Educational Background (other) Attach a separate sheet if necessary. Educational Background (other) Attach a separate sheet if necessary.

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

NIA

Campaign Finance Information (not applicable to candidates for federal office)

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

By signing this document, I hereby state that:

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2/11/21

Date Signed

JS # 3619

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Candidate Filing			तः स्व ्रिक्षे	SEL 190
District			۔ بر ا	rev 01/21
			: ;;	ORS 255.235
	-	ormation must be completed or the	e form will be reje	cted.
2021 District Election Filing Da	ates			
Candidate Filing February 6, 2	021 to March 18, 2021	Withdrawal Date March 18, 202	21	
This filing is an	U Original	Amen	dment	1
Office Information		<u> </u>		
	IT PARK Y	Kar DISTRI	ici	
District, Position or County:	POSITION	2		
Filing Information			and to contain the second s	
Filing with the required \$10	0.00 fee			
Prospective Petition				
Candidate Information				
Name of Candidate				
First 10m	MI Last	WINN	Suttix	
How you would like your nam				
TOM	WINN			
Candidate Residence/Route A	ddress			
Street Address		City HECCX	State	Zip
81227 5 JUNI	PAR CANYON RE	D MECCA	OIZ	97835
Candidate Mailing Address an	d Contact Information: At least on	e phone number and email address	is required.	
Street Address or PO Box		City	State	Zip
Work Phone	Home Phone	Cell Phone	Fax	
		541379 8893	i	
Email Address		Web Site, if applicable		
TOMWINN Q ag	MAIL. Com			
Race and Ethnicity Optional				
Occupation (present employn	nent) If no relevant experience, Nor	ne or NA must be entered.		
		*		
SECE E	malipel			
Occupational Background (pro	evious employment) If no relevant	experience, None or NA must be en	tered.	
NA				
1017				

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
NA			
Educational Background (other) Attach a sepa	rate sheet if necessary.		

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

NA

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Date Signed

- # 3602