

**Candidate Filing  
District**

**SEL 190**  
rev 01/14  
ORS 255.235

**i** All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

**Candidate Information**

**Name of Candidate**

First MARGUERITE	MI G.	Last PERRY	Suffix	Title
---------------------	----------	---------------	--------	-------

**How you would like your name to appear on the ballot**

First MARGUERITE	MI	Last PERRY	Suffix
---------------------	----	---------------	--------

**Candidate Residence/Route Address**

Street Address 32905 NE CHAMBERLAIN RD	City CORBETT	State OR	Zip 97019
---	-----------------	-------------	--------------

**Candidate Mailing Address**

Street Address or PO Box PO BOX 282	City CORBETT	State OR	Zip 97019
--	-----------------	-------------	--------------

**Contact Information: Only one phone number is required.**

Work Phone	Home Phone	Cell Phone 503-701-1373	Fax
------------	------------	----------------------------	-----

Email Address mgpcorbett@gmail.com	Web Site, if applicable
---------------------------------------	-------------------------

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Office Information**

Filing for Office of: SCHOOL BOARD

District, Position or County: CORBETT SCHOOL DISTRICT      Director      POSITION #1      MULTNOMAH Co.

**Occupation (present employment) If no relevant experience, None or NA must be entered.**

RETAIL MANAGER - FRIENDS OF VISTA HOUSE

**Occupational Background (previous employment) If no relevant experience, None or NA must be entered.**

EXECUTIVE DIRECTOR - FRIENDS OF VISTA HOUSE

ENGINEERING TECHNICIAN - INTEL

**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
PACIFIC UNIVERSITY		BS - BIOLOGY	→
HOLY CHILD ACADEMY	12		

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.**

NONE

**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



**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)

*Marguerite Perry*

3/3/2015

Candidate's Signature

Date Signed

TIM SCOTT  
DIRECTOR OF ELECTIONS

15 MAR - 3 AM 9: 54

RECEIVED

For Office Use Only

Initials

*SJ*

CC Approval Code/Receipt Number

23410