Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 01/20 ORS 249.031

Filing Dates			Candidate Fi	ling	Candidate \	Withdrawal		
Primary Election May 19, 2020	First Day to File Last Day to File		September 12, March 10, 202		March 13, 20)20		
General Election November 3, 2020	First Day to File Last Day to File		June 3, 2020 August 25, 202	20	August 28, 2	020		
Filing Information								
This filing is an	Original		Amendme	nt	<u> </u>			
Office Information								
Filing for Office of: Metro Councilor								
District, Position or County: District 3								
Party Affiliation:		Democratic P	arty [Republican Pa	rty No	onpartisan		
Incumbent Judge (for judicial car	ndidates only):	Yes		No	□ No	ondisclosure on file		
Filing Method								
Fee		<u>iara y</u> ny ivoana ao amin'ny	<u> 1946-1950 - Santa Articologica (n. 1948)</u>	TO THE ATT OF THE PARTY OF THE		<u> </u>		
Office United States President	Filing Fee		Office District Attorney		Filing Fee \$50			
United States Vice President	n/a		County Judge \$50					
United States Senator United States Representative	\$150 \$100	MSD Executive Officer, MAD Director \$100 MSD Councilor \$25						
Statewide Offices	\$100 County Office			\$50				
State senator or Representative	\$25		City Office		Set by chart	er or ordinance		
Circuit Court Judge	\$50		Justice of the Pea	ace	n/a			
Prospective Petition, in lieu o	of filing fee		Some circulato	rs may be paid	Yes	No		
Candidate Information								
Name of Candidate								
First Mary	мі А	Last Balbag			Suffix	Title Dr.		
How you would like your name to appear on the ballot								
Dr. Alison Balbag								
Candidate Residence / Route Ad	dress					<u> </u>		
Street Address		City		ate	Zip 🖺	County		
15860 SW Cardinal Loop		Beaverto	on C	DR	97007	Washington		
Candidate Mailing Address and Contact Information Only one phone number and an email is required.								
Street Address or PO Box same		City	St	ate	Zip Sign	7 O		
Work Phone 503.319.7301	Home Phone		Cell Phone		Fax	3 · · · · · · · · · · · · · · · · · · ·		
Email Address VoteDrAlison@gmail.com Web Site, if applicable								
Race and Ethnicity Optional								
Multiracial								

Occupation (present employment) If not employed, enter "Not Employed".							
professor; musician; healthspan-ge	rontologist; arts, v	vellness, education, & s	ocial justice advocate				
Occupational Background (previous employmer	nt) If no relevant experience	e, None or NA must be entered.					
NA							
Educational Background (schools attended)							
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Gerontology				
University of Southern California	Doctorate	PhD ————————————————————————————————————					
University of Southern California	Doctorate	Doctor of Musical Arts	Harp Performance				
University of Southern California	Master's	Master of Music	Harp Performance				
University of Southern California	Bachelor's	Bachelor of Music	Harp Performance				
Educational Background (other) Attach a separate sheet if necessary.							
Valley Catholic High School (Beaverton, OR)							
Prior Governmental Experience (elected or app	ointed) If no relevant expe	erience, None or NA must be entere	 ed				
Arts Commissioner, City of Beaverton; Vice Chair of Arts Commission, City of Be							
Campaign Finance Information Not applicable	to candidates for federal o	iffice.					
A candidate must file a Statement of Organization no later than the deadline for filing a nominating petition meet the criteria for an exemption. To meet the crite and not expect to spend or receive more than \$750 d	ot later than three business on, declaration of candidacy, eria, the candidate must serviuring the entire calendar ye	days of first receiving a contribution or certificate of nomination, which we as their own treasurer, not have lar (including in-kind contributions a	an existing candidate committee, 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.							
Candidate Attestation							
By signing this document, I hereby state that: I will accept the nomination for the office indicat I will qualify for said office if elected; All information provided by me on this form is true. No circulators will be compensated based on the For Major Political Party Candidates.	ue to the best of my knowle number of signatures obta	ined by the circulator on a prospec					
If not nominated, I will not accept the nomination I have been a member of said political party, sub nominating petition or declaration of candidacy in the said political party.	ilect to the exceptions state	d in ORS 249,046, for at least 180 o	lays before the deadline for liling a				
Warning Supplying false information on this form may (ORS 260,715). A person may only file for on the person has withdrawn from the first filln	e lucrative office or not mo	re than one precinct committee per	nd/or prison for up to 5 years rson at the same election. Unless				
		2/1	nlanan				
Candidate Signature	<u> </u>		0/2020				
For Office User Only Initials P. S	Batch S	heet/CC Approval Code/ Receip	t Number 24340				