Candidate Filing February 8, 2025 to Ma	rch 20, 2025	Withdrawal Date March 20,	2025	
This filing is an	∰ Original	☐ An	nendment	
Office Information				
Filing for Office of: FORTLAN	SD-BBUC	ScHoa BOARD		
District, Position or County:	IE 4		<del></del>	
Filing Information				
Filing with the required \$10,00 fee				
Prospective Petition				
Candidate Information				
Name of Candidate				
First	MI <i>)</i>	Last		
HERMAN			SKEENE	
How you would like your name to appea	ar on the ballot			
HERMAN GREEN	E			
Candidate Residence/Route Address				
Street Address	1	City	State	Zip
7525 N/FOWLER	AVE	TORTZAND	DR	9721
Candidate Mailing Address and Contact	Information		-	
Street Address or PO Box	<b>A</b>	City	State	Zip
7525 N FOWLER		TORTRAND	シストリンス シストリー	4721
Work Phone	Home Phone	Cell Pr	ione	•
AMADE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		50	3-719-00	<u> 372                                    </u>
Email Address	\	Web Site, if applicable		
hermangreene(	@gmail	COTA		
Race and Ethnicity Optional			garan <u>andara</u>	
BLACK				
Occupation (present employment) If no	relevant experience, No	one or NA must be entered.		
	/ _ `			
SENIOR FASTOR	1 CURR	ENT SCHOOL DO	ARD MEM	BER
	,		antaund	
Occupational Background (previous emp				
Occupational Background (previous emp				ANITER
Occupational Background (previous emp		UC7ANT / COMMUNE		ANIZER

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	4
MARNINE FACIFIC COLLEGE	(SEWI)	MASTERS	16-10-18-11-0
			COALSCESAIF
ducational Background (other) Attach a separat	e sheet if necessary.		
	THE REAL PROPERTY OF THE PARTY		
Prior Governmental Experience (elected or appo	ointed) If no relevant expe	rience, None or NA must be er	ntered.
NURRENT SCHOOL BOA	RN DIFECTO	R	
			*
			or the action of the Administration of the second
Campaign Finance Information			
a candidate must file a Statement of Organization not	later than three business day	rs of first receiving a contribution	or making an expenditure and
ater than the deadline for filing a nominating petition	, declaration of candidacy, or	certificate of nomination, whiche	ever occurs first, unless they
neet the criteria for an exemption. To meet the criteri nd not expect to spend or receive more than \$750 du	ia, the candidate must serve a	as their own treasurer, not have a	in existing candidate committe
nd not expect to spend or receive more than \$750 du f you have an existing candidate committee you must			
r you have an existing candidate committee you must ncludes changes to the election you are active in and			itel a change in information, i
See the Campaign Finance Manual for the procedural			idate committee.
Residence Address Exemption			
o exempt your residence address from public disclose	ure, complete form <u>SEL 180</u> –	Residence Address Exemption Re	equest. The request for a
Residence Address Exemption MUST include a publicly	disclosable mailing address.	See the Candidates Manual for fu	urther information.
I don't want my residence address to be disc	losed. I will be filing a sepa	rate <u>SEL 180 – Residence Addres</u>	s Exemption Request.
Candidate Attestation			
By signing this document, I hereby state that:		1	
→ I will qualify for said office if elected;			
All information provided by me on this form is true	e to the best of my knowledg	e	
Warning	Marchard MAR		
Supplying false information on this form may (ORS 260.715). A person may only file for one	result in conviction of a felon	y with a fine of up to \$125,000 ar	id/or prison for up to 5 years.
filings are invalid. (ORS 249.013 and ORS 249.		dection, others the person has wi	
mings are invalid. (ONS 245.015 and ONS 245.			
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		8	2/10/25 Date Sign