Candidate Filing

Major Political Party or Nonpartisan

Filing Dates			Candidate I	Filing	Cano	lidate Withdrawal	
Primary Election May 21, 2024	First Day to File Last Day to File		September 14, 2023 March 12, 2024		Marc	h 15, 2024	
General Election November 5, 2024	First Day to File Last Day to File		June 5, 2024 August 27, 2024		Augu	st 30, 2024	
Filing Information		····					
This filing is an	Original	·····	Amendm	ient		-	
Office Information						······································	
Filing for Office of: Multnoma	h County Comn	nisioner					
District, Position or County: 1					·····		
Party Affiliation:	·····	Democratic	Democratic Party Republican Par		Party	rty 🔳 Nonpartisan	
Incumbent Judge (for judicial c	andidates only):	Yes			raity	Nondisclosure on fil	
Filing Method							
Fee		·····					
Office United States President United States Vice President United States Senator United States Representative Statewide Offices State senator or Representative Circuit Court Judge Prospective Petition, In lieu Candidate Information Name of Candidate First	\$50		Office District Attorney County Judge MSD Executive Officer, MAD Director MSD Councilor County Office City Office Justice of the Peace Some circulators may be paid		\$50 \$50 ector \$10 \$25 \$50 Set n/a	\$100 \$25 \$50 Set by charter or ordinance n/a Yes No	
Kevin		Fitts					
How you would like your name	to appear on the	ballot		-		۲۰۰۰	
Kevin Fitts							
Candidate Residence / Route A	ddress	······································					
Street Address		City		State	Zip	County	
3625 SE 16th Ave		Portland	C	Dregon	97202	Mult	
Candidate Mailing Address and	Contact Informati	on Only one phon	e number and an	email is required.	······		
Street Address or PO Box	- ,	City		State	Zip		
3625 SE 16th Ave		Portland	C	Dregon	97202		
Work Phone	Home Phone		Cell Phone 503-752-971	13	Fax		
Email Address			Web Site, if ap	plicable			
nefir@gmail.com			www.kevinfitts.com				
Race and Ethnicity Optional					· · · · · · · · · · · · · · · · · · ·		
caucasian							

				Mark 1 112
A		una a nel le nat ar	molected enter	"Not Employed"
UCCUDATION	coresent emplo	VIII: CHILI II IIUL CI	INNOVED, CHICH	"Not Employed".

Executive Director, Oregon Mental Health Consumers Association

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

Cascadia Behavioral Health, Mental Health Services West, The Mind Empowered, PeerNetworks,

Educational Background (schools attended)			o
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Oakville High School	12th	GED	CollegePrep
Portland Community College	13th		Psychology
		-	
Educational Background (other) Attach a separat	RECE		
		ionso. None or NA must be entered	
Prior Governmental Experience (elected or app			
Universal Health Care Legislative Work (Measure 109 Council, State of Oregon's Hospital Advisory Board, Mult Cty Behav Subcommittee	Repayloral Healin Lr.	AUVISOR CUUNCIL U	
Campaign Finance Information Not applicable	e to candidates for federal of	fice.	· ·
A candidate must file a Statement of Organization no later than the deadline for filing a nominating petitio meet the criteria for an exemption. To meet the crite and not expect to spend or receive more than \$750 c If you have an existing candidate committee you mus includes changes to the election you are active in and	n, declaration of candidacy, or ria, the candidate must serve luring the entire calendar yea st amend the statement of or d the office you are running f	or certificate of nomination, whichev a s their own treasurer, not have an ar (including in-kind contributions an rganization not later than 10 days aft or.	er occurs first, unless they existing candidate committee, id personal funds). ter a change in information. This
See the Campaign Finance Manual for the procedura	l and legal requirements of e	stablishing and maintaining a candid	ate 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 tri → No circulators will be compensated based on the For Major Political Party Candidates	ue to the best of my knowled number of signatures obtair	ed by the circulator on a prospective	
 → if not nominated, I will not accept the nominatio → I have been a member of said political party, sub nominating petition or declaration of candidacy 	lect to the exceptions stated	In ORS 249.046, for at least 180 day	s before the deadline for filing 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 filin	e lucrative office or not more	than one precinct committee perso	/or prison for up to 5 years. n at the same election. Unless
' REDACTED	-	12/29/203	
Candidate Signature		Date	