

**Candidate Filing  
District**

**SEL 190**

rev 01/16  
ORS 255.235

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

This filing is an  Original  Amendment

**Office Information**

Filing for Office of: **Pos. 4 Director**

District, Position or County: **Parkrose School District #3**

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix	Title
Kori		Basquez		

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

**K. Basquez**

**Candidate Residence/Route Address**

Street Address	City	State	Zip
8408 NE Prescott	Portland	OR	97220

**Candidate Mailing Address and Contact Information: Only one phone number is required.**

Street Address or PO Box	City	State	Zip
8408 NE Prescott	Portland	OR	97220

Work Phone	Home Phone	Cell Phone	Fax
360-989-6170	503-730-4571		

Email Address	Web Site, if applicable
kbasquez@csnw.org	

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

Community Mental Health Clinician and Community Support Team Lead, CSNW, Vancouver, WA;  
Mental Health Investigator, Washington County, Hillsboro, Oregon.

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

I am a mental health clinician, supervisor, and mental health investigator serving Clark County, Washington, and Washington County, Oregon. I have worked in non-profit community mental health in excess of ten years and serve clientele with severe and persistent mental health issues. I have also served as a mental health investigator for Washington County, Oregon in excess of three years.

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 17 FEB 21 AM 10:08  
 TIM SCOTT  
 DIRECTOR OF ELECTIONS

**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
University of Phoenix	Masters	Master of Science	Psychology
Portland State University	Bachelors	Bachelor of Science	Psychology; Sociology Minor
Portland Community College	Associates	Associate of Arts	Oregon Transfer Degree

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.**

I do not currently have elected or appointed experience. However, I maintain contractual employment for Washington County, Oregon, as a mental health investigator.

**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)

*[Handwritten Signature]*

Candidate's Signature

2-19-17

Date Signed

For Office Use Only Initials \_\_\_\_\_