Filing of Candidacy for Nonpartisan Nomination

SEL 120 rov 01/10: ORS 249.031

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Filing Information					
O Secretary of Stat	te of Oregon ©	County			
O City Recorder (A	uditor), City of				
Candidate and Part	v Information				
O Incumbent for O	ing pananananan ana ang ang ang ang ang ang a				
Candidate Name			Filing for Office of		
Loretta J. Smith			Multnomah County Commissioner		
How Name Should Appear on Ballot			District or Position Number		
Loretta Smith			2		
Residence Address,	Street/Route				
6239 NE 6th A	\ve				
City		State	Zip Code	County of Residence	
Portland		Oregon	97211	Multnomah	
Home Phone		Work Phone		Cellular Phone	
503 249-2921			1		
Fax	Email Address	d oom	Website		
BA-111 A J.J.	sloretta407@ac		4-		
6239 NE 6th AV	ere all correspondence \	WIII DE SENT, STREET/RO	ute		
City		State	Zip Code		
Portland	1	OR	97211		
Filing Type					
Committee and Co	y by Declaration, with th	e Required Filing Fee (OBS 249 056)		
Filing Fees:	y by becommender, with the	Filing of Candidacy by Declaration		Filing Fee State Petition Signatures	
		(ORS 249.056)		Voters' Pamphlet Required (ORS 251.095)	
Statewide Offices		\$100		\$3000 or 500 🗪	
Circuit Court Judge District Attorney		\$50 \$50		\$600 or 300 \$\frac{1}{2}\$ \tag{7}	
County Judge		\$50		\$600 or 12 300 ,	
MSD Executive Offi MSD Councilor	cer, MSD Auditor	\$100 \$25			
County Office		\$50		\$600 or 300 P <	
City Office set by o		set by charter or ordinar	nce	\$600* or300	
Justice of the Peace n/a *for cities with a population of 50,000 or more (ORS 251,005)			\$600 or \$\frac{1}{2} 300 \frac{1}{2}		
	by prospective petition will not be paid (SEL 300		posed signature sheet	(SEL 121) and the statement one or more	
			at a state of the		
	ORS 249.020, 249.064)	with the required sign	ature sneets certified b	y the appropriate county	
2010 Filing Dates: Pr	imary Election May 18, 2	2010 and General Elect	ion November 2, 2010		
	Filing for Candidacy	Filing for State	Voters' Pamphlet	Withdrawing Candidacy	
Primary Election General Election	First Day September 10, 2009 June 2, 2010	First Day September 10 June 2, 2010	, 2009		
Primary Election General Election	Last Day March 9, 2010 August 24, 2010	Last Day March 11, 2010 August 24, 20		Last Day March 12, 2010 August 27, 2010	

Required Information (if no relevant information					
Occupation present employment – paid or u Field Representative-Senator Ron V	·				
Occupational Background previous employe					
GOVERNMENT					
Educational Background schools attended, Complete Name of School no acronyms	use attachment if needed Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional		
Oregon State University, Corvallis, Oregon		BA	Communications		
Ottawa Hills High School, Grand Rapids, Michigan	12	High School Diploma			
Other: Prior Governmental Experience elected or a Precinct Committee Person	appointed				
By signing this document, I hereby state: → that I will accept the nomination for office → that I will qualify for said office if elected → that all information provided by me on this	form, including my occup		ackground,		
and prior governmental experience, is true					
Check the applicable box (not applicable to candidates for federal office – US Senate and US Representative): By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than \$350 or receive more than \$350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$350 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.					
By marking this box, I certify that I have all (SEL 220). For detailed instructions, see th			didate Committee		
Candidate's Signature		03/09/2010			



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. Unless the person has withdrawn from the first filling, all fillings are invalid. (ORS 249.013(3))

For Office Use Only	maa	
Iditials (1)	Cash or Check Number	Candidate ID Number
Receipt Number	Office Number	Candidate Committee ID Number