Filing of Candidacy for Special District Nomination

This information is a matter of public record and may be published or reproduced. Candidate Information Filing for Office of Candidate Name Corbett School Board Victoria Purvine District, Position or Zone Number if applicable How Name Should Appear on Ballot Position 7 Director Victoria Purvine Residence Address, Street/Route 303 SE Hemlock Road Zip Code **County of Residence** City State 97019 Multnomah Corbett OR. Cellular Phone Home Phone Work Phone 503 307-2129 503 695-2182 503 695-2182 Date of Election Email Address May 17, 2011 ghpurvine@aol.com Mailing Address where all correspondence will be sent, Street/Route PO Box 125 Zip Code City State OR 97019 Corbett Filing Information • Filing of candidacy by declaration, with the required \$10.00 fee. O Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials. Required Information (if no relevant information, list "none") Occupation present employment - paid or unpaid Evergreen Remodeling, Inc co-owner Occupational Background previous employment - paid or unpaid Lincoln City Physical Therapy: receptionist McDowCo: real estate assistant Corning Ware: Manager of Corning/Revere factory outlet

Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
University of Oregon	diploma	ВА	marketing
University of Oregon	diploma	BA	management
Toledo High School	12	diploma	college prep

Other:

Continuing education for DEQ and CCB licenses

Daniel Hart was the order of the sale was th		
Required Information (if no relevant information, list "none") Prior Governmental Experience elected or appointed		
None		
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By signing this document, I hereby state:		
 that I will qualify for said office if elected that all information provided by me on this form, including my occupation, educational a and prior governmental experience, is true to the best of my knowledge 	nd occupational backgrou	und,
Check the applicable box:		
By marking this box, I certify I do not have an existing candidate's committee and I do nor receive more than \$750 during each calendar year. I understand I must still keep receif total contributions or total expenditures exceed \$750 during a calendar year, I must fo Campaign Finance Manual.	ords of all campaign trans	sactions and
By marking this box, I certify that I have already filed or will soon file a Statement of Org (SEL 220). For detailed instructions, see the Campaign Finance Manual.	ganization for Candidate	Committee
	-3/ /.	
Candidate's Signature	<u> </u>	
This information is a matter of public record and may be published or reprodu	ced.	
Warning Supplying false information on this form may result in conviction of a felony with a fine	of up to \$125,000 and/c	or prison for
up to 5 years. (ORS 260.715) No person may be a candidate for more than one district	office, unless the district	t,hạs less than



up to 5 years. (ORS 260.715) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013).

For Office Use Only	2323		
Initial 77 589	Cash or Check Number	Candidate ID Number	
Receipt Number	Office Number		