

District Candidate Filing

SEL 190

rev 1/12, ORS 255.735

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Candidate Information

Candidate Legal Name* Amanda Hoyt Candidate Name (As it should appear on ballot)* Amanda Hoyt

Filing for Office of* Board of Directors 1 District and/or position (if applicable)* Sauvie Island RFPD #30J Position 3

Residence Address, Street/Route* 13831 NW Charlton Rd

City* Portland State* OR Zip* 97231 County of Residence* Multnomah

Home Phone 503 730 2517 Work Phone _____ Cell Phone 503 730 2517 Fax _____

Email Address* amanda-hoyt@msn.com Date of Election* May 21, 2013

Mailing Address (where all correspondence will be sent) Street/Route* 18342 NW Sauvie Island Rd

City* Portland State* OR Zip* 97231

* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee.

Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required)
Sauvie Island Kennels

Occupational Background previous employment - paid or unpaid (required)
Sauvie Island RFPD #30J 2010-2012
Woodburn Fertilizer 2004-2005
Symons Frozen Foods 2003-2004

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
<u>Portland Community College</u>	<u>N/A</u>	<u>EMT Certification</u>	
<u>Oregon State University</u>	<u>16</u>	<u>BS</u>	<u>Ag Sciences</u>
<u>Phoenix High School</u>	<u>12</u>	<u>Diploma</u>	

Other:

(continued)

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Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

Sauvie Island RFPD #30J 2009-2013

By signing this document, I hereby certify that:

- I will qualify for said office if elected
- All information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge

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 committee and 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 2012 Campaign Finance Manual.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the 2012 Campaign Finance Manual.

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). 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 and ORS 249.170)

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3/19/13
Date Signed

For Office Use Only

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Initials	Cash, Check Number, or credit card approval #	Receipt #