

District Candidate Filing

SEL 190

rev 1/12: ORS 265.235

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Candidate Information			
Candidate Legal Name* Robert L. Churnside		Candidate Name (As it should appear on ballot)* Robert 'Bob' Churnside	
Filing for Office of* Commissioner, Corbett Water District		District and/or position (if applicable)* Corbett Water District, Position #4	
Residence Address, Street/Route* 28626 E. Woodard Road			
City* Troutdale	State* OR	Zip* 97060	County of Residence* Multnomah
Home Phone (503) 492-3477	Work Phone (503) 849-1367	Cell Phone (503) 545-6422	Fax
Email Address* Bob.Churnside@gmail.com		Date of Election* May 21, 2013	
Mailing Address (where all correspondence will be sent) Street/Route* Same			
City*	State*	Zip*	

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

Filing Information
<input checked="" type="radio"/> Filing with the required \$10.00 fee.
<input type="radio"/> Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")
Occupation present employment – paid or unpaid (required) Moore Excavation (Project Superintendent) and Cattle Rancher
Occupational Background previous employment – paid or unpaid (required) Construction of underground water systems and other utilities

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
Rex Putnam High School	12th Grade	Diploma	

Other:

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

Prior Governmental Experience elected or appointed (required)

Commissioner, Corbett Water District for four years (elected)

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).

Candidate's Signature

Date Signed

3-19-13

For Office Use Only

Initials

Cash, Check Number, or credit card approval #

Receipt #