

District Candidate Filing

SEL 190

rev 1/12: ORS 255 235

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Candidate Information

Candidate Legal Name*

Mark Wayne Doyle

Candidate Name (As it should appear on ballot)*

Mark Wayne Doyle

Filing for Office of*

Burlington Water District Commissioner

District and/or position (if applicable)*

Board of Commissioners

pos 5

Residence Address, Street/Route*

16617 NW St Helens Rd.

City*

Portland

State*

OR

Zip*

97231

County of Residence*

Multnomah

Home Phone

(503) 621-9854

Work Phone

(503) 516-8819

Cell Phone

(503) 516-8819

Fax

Email Address*

mdoyle@georgefox.edu

Date of Election*

3/20/2013

Mailing Address (where all correspondence will be sent) Street/Route*

16617 NW St Helens 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)

Volunteer Research OHSU

Occupational Background previous employment – paid or unpaid (required)

Post Doctoral Fellow OHSU

Assistant Professor Biology Chemistry GeorgeFox University

Disabled 2006

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

Prairie City High School High School Diploma

Oregon State University Engineering/ Science 3 years

Eastern Oregon State College Bachelor of Arts Biology/Chemistry

Oregon Health & Sciences University Ph.D. Physiology and Pharmacology

Other:

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

Prior Governmental Experience elected or appointed (required)

Burlington Water District Board of Commissioners 2000- 2005

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).

[Redacted Signature]

3-19-2013

Candidate's Signature

Date Signed

For Office Use Only

4/2/13

23084

Initials

Cash, Check Number, or credit card approval #

Receipt #