Candidate Information Candidate Legal Name* Susie May Jones Filing for Office of* Board of Directors			Candidate Name (As it should appear on bailot)* Susie Jones District and/or position (if applicable)* MHCC, zone 1		
404 SE Hale Dr					
City*		State*	Zip*	County of Residence*	
Gresham	'	OR	97080	Multnomah	
Home Phone	Work Pi	none	Cell Phone	Fax	
	·		503-621-6316	503-661-3924	
Email Address*		Date of Election*	-	<u> </u>	
susie.jones52@frontier.com		May 21, 2013			
Mailing Address (where all o 404 SE Hale Dr.	orrespondence	will be sent) Stree	t/Route*		
City*		State*	Zîp*		
Gresham	•		97080		
* Indicates a required field.	At least one p	hone number is als	so required.		
Filing Information				2013 2013	
Filing with the required \$10.00 fee.					
O Filing by petition with the Required Information (if no					
Occupation present employment – paid or unpaid (required)				7 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Retired	•	•			
Occupational Background p	revious emplo	yment – paid or unp	aid (required)		
1999-2012; Faculty, M 1991-1999; Teacher, M 1982-1991; Teacher, M 1980; Clerical, Schnitz 1979; Performer, Disn	David Doug North Clack zer Steel Pro	las School Distr amas School Di	ict		
1070,1 0/10/11/01, 2/0/1					
Educational Background sch Complete Name of School (use attachment if n Last Grade Level Completed	eeded (required) Diploma/Degree/ (AA, BA, BS, MA,		
Educational Background s ch		Last Grade Level	Diploma/Degree		
Educational Background sch Complete Name of School (Universily of Portiand		Last Grade Level	Diploma/Degree/ (AA, BA, BS, MA,	PhD, etc) optional	
Educational Background sch Complete Name of School (no acronyms)	Last Grade Level	Diploma/Degree, (AA, BA, BS, MA, MM	PhD, etc) optional Music Composition	

Required Information (if no relevant information, list "none" or "n/a")
Prior Governmental Experience elected or appointed (required)
none

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):

- O 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).

2/7/2013

Date Signed

For Office Use Only

Cash, Check Number, or credit card approval #

Receipt#