

Candidate Filing
District

MAR 21 2019

SEL 190

rev 01/16
ORS 255.235

i All information must be completed or the form will be rejected.

This filing is an Original Amendment

Office Information

Filing for Office of: Multnomah County Education Service District Board

District, Position or County: Position 7, Zone 3

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Katrina	M	Doughty		

How you would like your name to appear on the ballot

Katrina Doughty

Candidate Residence/Route Address

Street Address	City	State	Zip
Residence address redacted	Portland	OR	97206

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
7535 NE AMBASSADOR PLACE, SUITE B	PORTLAND	OR	97220

Work Phone	Home Phone	Cell Phone	Fax
		207-613-6373	

Email Address	Web Site, if applicable
KatrinaDoughtyPDX@gmail.com	

Occupation (present employment) If no relevant experience, None or NA must be entered.

Maternal and Child Health Coordinator, 211info
Board, Community Engagement Chair, Young Nonprofit Professionals Network of Portland
Board, At-Large, Oregon Adolescent Health Alliance
Board, At-Large, Planned Parenthood Columbia Willamette Young Supporters Group (FWB)

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

Reproductive Options Counselor, Lovejoy Surgicenter
HIV Educator/Tester, Oregon Health Authority - Portland State University
AmeriCorps VISTA, Oregon Health Authority - Yamhill County Public Health
Lead Access Coordinator-Ryan White Navigator, West County Health Centers
Lead Care Coordinator, Sacramento Native American Health Center
Lead Teen Clinic Specialist, West County Health Centers

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TIM SCOTT
DIRECTOR OF ELECTIONS

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Portland State University	Senior - In Progress		Public Health Education
El Molino High School		HS Diploma	

Educational Background (other) Attach a separate sheet if necessary.

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

N/A

Campaign Finance Information (not applicable to candidates for federal office)

Candidate Committee

- Yes, I have a candidate committee.
- No, 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 Campaign Finance Manual.
- No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).


By signing this document, I hereby state that:

- I will qualify for said office if elected
- all information provided by me on this form is true to the best of my knowledge

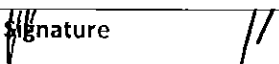


Warning

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). A person may only file for one lucrative office at the same election. (ORS 249.013 and ORS 249.170)

Signature redacted 

03/21/2019

Candidate's Signature 

Date Signed

For Office Use Only Initials _____