## **District Candidate Filing**

**SEL 190** 

Candidate Legal Name*			Candidate Name (A	As it should anne	ar on ballot)*		
THOMAS W.	LEW	19	Candidate Name (As it should appear on ballot)*				
Filing for Office of*		<u> </u>	District and/or position (if applicable)*				
BOARD MEM		POSITION #/					
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1333 S.E.		4					
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PORTLAND	1	OR.	97233				
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5×3 2475	715	<u> </u>	- SAME				
<u> 5か3 3475</u> Email Address*		Date of Election*					
GAMODATO @ A	ol con	1	Hov.	2812			
Wailing Address (where all c			/Route*				
1333 SEC City*PORTLAND		State*	Zip*				
			Zip* 97233	5			
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