

# Candidate Filing

District

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: DIRECTOR, RIVERDALE SCHOOL DISTRICT, #51JT

District, Position or County: POSITION 5 DIRECTOR, 4 YEAR TERM, RIVERDALE SCHOOL DISTRICT

## Filing Information

Filing with the required \$10.00 fee

Prospective Petition

## Candidate Information

### Name of Candidate

First	MI	Last	Suffix	Title
RAKESH	KOCHIKAK	PAI		DR.

### How you would like your name to appear on the ballot

RAKESH K. PAI

### Candidate Residence/Route Address

Street Address	City	State	Zip
01308 SW MILITARY RD	PORTLAND	OR	97219

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

Street Address or PO Box	City	State	Zip
01308 SW MILITARY RD	PORTLAND	OR	97219

Work Phone	Home Phone	Cell Phone	Fax
N/A	N/A	(503) 724-6744	N/A

Email Address	Web Site, if applicable
rajnya@gmail.com	N/A

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

EXECUTIVE MEDICAL DIRECTOR, REGENCE BLUE CROSS / BLUE SHIELD  
100 SW MARKET ST.  
PORTLAND, OR 97201

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

MEDICAL DIRECTOR, PROVIDENCE HEALTH PLAN  
3661 SW MURRAY BLVD #45  
BEAVERTON, OR 97005

DIRECTOR OF ELECTIONS  
TIM SCOTT  
RECEIVED  
MAR 16 AM 11:05

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
BATES COLLEGE	BACHELOR OF SCIENCE	BACHELOR OF SCIENCE	BIOLOGY / PSYCHOLOGY
UNIVERSITY OF NEW MEXICO	M.D	DOCTORATE OF MEDICINE	MEDICINE
UNIVERSITY OF TENNESSEE	MBA	MASTERS OF BUSINESS ADMINISTRATION	BUSINESS
DARTMOUTH COLLEGE	MASTERS	MASTERS OF HEALTH CARE	HEALTH CARE

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

N/A

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)

*Jallesh Kpau*

3/16/17

Candidate's Signature

Date Signed

For Office Use Only Initials *SS*

*Receipt # 23842*