Candidate Filing District				SEL 190 rev 03/11 ORS 255.23
1 This form must be filed with a	ounty elections of	ficial. All information must be c	completed or the form will be rej	ected.
This filing is an	🔳 Orij	ginal	Amendment	
Office Information				
Filing for Office of: Sauvie Is	land Fi <mark>re</mark> Bo	ard Director - Positior	n 3	
District, Position or County: Sau	vie Island F	re #30	- · ·	
Filing Information				
Filing with the required \$10.00	fee			
Prospective Petition			·	
Candidate Information				
Name of Candidate	<u> </u>			
First Heidi	I м Н	_{Last} Keller	Suffix	Title

Street Address 28100 NW Sauvie Island Rd		City Portland	^{State} OR	^{Zip} 97231
Candidate Mailing Address	s and Contact Information: Only or	e phone number is required.	22	
Street Address or PO Box		City	State	Zip
Work Phone 503-943-7158	Home Phone 503-621-3511	Cell Phone	Fax	
Email Address mhmbhkel@gmail	.com	Web Site, if applicable		

University of Portland - Director of Student Accounts

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

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Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Pacific University		BA	Education
			· · · · · · · · · · · · · · · · · · ·
		rience. None or NA must be ente	red.
o the Osternamental Europiance (elected or a			
	Rhoused Armo Leigadue evice		
Prior Governmental Experience (elected or a Board Member 1 year	Aboured Anno Televene exter		

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:

- \rightarrow 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

3-11-19

Date Signed

Candidate's Signature

DIRECTOR OF ELECTIONS. TIM SCOTT TIM SCOTT DIRECTOR OF ELECTIONS.

RECEIVED