Candidate Filing

SEL 190

rev 01/16 ORS 255.235

District

All information must be con	mpleted or the form will	be reject	ed.			
This filing is an	Original		☐ Amendment			
Office Information		· <u></u>				
Filling for Office of: Position	2, Director					
District, Position or County:Par	rkrose School Di	istrict #	±3		_	
Filing Information			-			
Filing with the required \$10.0	00 fee					
Prospective Petition						
Candidate Information						
Name of Candidate						
First Sara	мі А	Last Kirby			Suffix	Title Mrs .
•						
How you would like your name	to appear on the ballot					
Sara Kirby						
Candidate Residence/Route Add	dress					
Street Address 11423 NE Fremo	nt Ct		city Portland		State OR	zip 97220
Candidate Mailing Address and	Contact Information: On	ly one ph	one number is required.	· • <u>-</u> ·		
Street Address or PO Box 11423 NE Fremo	ont Ct		city Portland		State OR	zip 97220
Work Phone	Home Phone 503-206-6090		Cell Phone	Fax		
Email Address sarakirby4parkrose@g	gmail.com		Web Site, if applicable			
Occupation (present employmen	nt) If no relevant experies	nce None	or NA must be entered			
Senior Solid Waste Plann		nec, none	or the mast be entered.			
Comor Coma Tradio Fiann	or, mono				DIRE:	7
On which had be a second as a		-1	d No		CT OR	77 77 77 77 77 77 77 77 77 77 77 77 77
Occupational Background (previous Chapters Motor		elevant ex	perience, None or NA must	be entered.	- 무 <u>오</u>	8 I S
Education Specialist, Metr Lead Educator, OMSI	U					1 ** }
Environmental Educator,	SMMA					IVED PH12:
Camp Director, SciTrek Museum					<i>i</i> . ∴	
Children's Program Coord	linator, Phoenix Zo	0			SNOILOS	20
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Educational Background (schools attended) If n	o relevant experience, Non	1						
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study					
Portland State University		Certificate	Project management					
Arizona State University		Bachelor of Science	Biology					
Bradshaw Mountain High School	<u> </u>	Diploma						
Educational Background (other) Attach a separat	te sheet if necessary.							
Prior Governmental Experience (elected or app	ointad) If no relevant evner	ionce None or NA must be enter	rad					
Appointed to Board of Education, pos								
Appointed to Board of Education, pos	IIIOH Z Farkiose Schi	Doi District Feb 2010 - Jul	16 2011					
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			1					
Campaign Finance Information (not applicable t	o candidates for federal of	tice)	· · · · · · · · · · · · · · · · · · ·					
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 Organiza	tion for Candidate Committ	tee (SEL 220).						
By signing this document, I hereby state that:		•						
→ I will qualify for said office if elected								
→ all information provided by me on thi	s form is true to the best of	fmy knowledge						
			•					
- Marriag								
Warning Supplying false information on this form	n may recult in conviction o	of a follow with a fine of up to \$1	25 000 and/or pricon for					
up to 5 years. (ORS 260.715). A person			25,000 010/01 prison for					
(ORS 249.013 and ORS 249.170)	may only me to one mere							
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Sona VX T	>		41311					
Candidate's Signature	\mathcal{L}		/ Date Signed					