

Filing of Candidacy for Special District Nomination

SEL 190

rev 02/11: ORS 255.235

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Candidate Information			
Candidate Name Bryan A. Smith		Filing for Office of MHCC Board of Education	
How Name Should Appear on Ballot B. Anthony Smith		District, Position or Zone Number if applicable Zone 5 Director	
Residence Address, Street/Route 11744 SE Foster Rd Unit 103			
City Portland	State OR	Zip Code 97266	County of Residence Multnomah
Home Phone	Work Phone	Cellular Phone 503-515-2191	
Fax	Email Address bantsmith@live.com	Date of Election May 17, 2011	
Mailing Address where all correspondence will be sent, Street/Route same as residence			
City	State	Zip Code	
Filing Information			
<input checked="" type="radio"/> Filing of candidacy by declaration, with the required \$10.00 fee.			
<input type="radio"/> Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors or at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials.			
Required Information (if no relevant information, list "none")			
Occupation present employment – paid or unpaid Inbound Financial Sales, U.S. Bancorp			
Occupational Background previous employment – paid or unpaid Retail Store Management, The Sharper Image			
Educational Background schools attended, use attachment if needed			
Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
Iowa State University	16	BS	Management
Iowa State University	16	BS	International Business
Other:			

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Required Information (if no relevant information, list "none")

Prior Governmental Experience elected or appointed

None

By signing this document, I hereby state:

- that I will qualify for said office if elected
- that all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge

Check the applicable box:

- By marking this box, I certify I do not have an existing candidate's committee and 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*.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the *Campaign Finance Manual*.

[Redacted Signature]

3/16/11

Candidate's Signature

Date Signed

2011 MAR 17 AM 9:20
 DIRECTOR OF REVENUE

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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) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013)

For Office Use Only

Initials

Cash or Check Number \$10.00

Candidate ID Number

Receipt Number #22580

Office Number