

Filing of Candidacy for Special District Nomination

SEL 190

rev 01/10: ORS 255.235

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Candidate Information

Candidate Name

Diane C. Noriega

Filing for Office of

Board of Education MHCC

How Name Should Appear on Ballot

Diane C. Noriega

District, Position or Zone Number if applicable

At large position #6

Residence Address, Street/Route

25600 SE Brian Ranch Rd.

City

Sandy

State

OR

Zip Code

97055

County of Residence

Clackamas

Home Phone

503-668-6888

Work Phone

Cellular Phone

503-805-1748

Fax

Email Address

dcdnoriega@mac.com

Date of Election

May 17, 2011

Mailing Address where all correspondence will be sent, **Street/Route**

25600 SE Brian Ranch Rd.

City

Sandy

State

OR

Zip Code

97055

Filing Information

Filing of candidacy by declaration, with the required \$10.00 fee.

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

retired educator

Occupational Background previous employment – paid or unpaid

Interim President, California State University Monterey Bay
 Provost, Academic Vice President, California State University Monterey Bay
 Dean, College of Education, California State University Sacramento
 Professor of Education, California State University Monterey Bay

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 JIM SPOTT
 DIRECTOR OF ELECTIONS

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

University of California Santa Barbara

PhD

Education

University of California Davis

MA

Spanish

University of California Santa Barbara

BA

Spanish

Other:

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 \$350 or receive more than \$350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$350 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*.

Candidate's Signature

2/7/2011

Date Signed

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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 KS Cash or Check Number \$10⁰⁰ Candidate ID Number _____
Receipt Number 22481 Office Number _____