

Filing of Candidacy for Special District Nomination

SEL 190
rev 02/11: ORS 255.235

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Candidate Information

Candidate Name Jane Doyle		Filing for Office of David Douglas School District	
How Name Should Appear on Ballot Jane Doyle		District, Position or Zone Number if applicable Position # 5	
Residence Address, Street/Route 3749 SE 129			
City Portland	State Oregon	Zip Code 97236	County of Residence Multnomah
Home Phone 503-816-2793	Work Phone 503-823-4328	Cellular Phone	
Fax 503-823-4329	Email Address doylesdream@msn.com	Date of Election May 17, 2011	
Mailing Address where all correspondence will be sent, Street/Route 3749 SE 129			
City Portland	State Oregon	Zip Code 97236	

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

Recreation Coordinator

Occupational Background previous employment -- paid or unpaid

2003 - Present Portland Parks and Recreation - Senior Center Project. A day program for developmentally disabled seniors.
 1994 - 2001 Pacific View Adolescent Treatment center - Director of Human Resources, Recreational Therapist
 1987 - 1994 Dammasch State Hospital
 8 years Girls soccer Coach (DDSC)
 6 years Girls scout leader

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 Oregon		BS	Parks and Recreation
David Douglas High School	12	Diploma	

Other:

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

Prior Governmental Experience elected or appointed

None at this time

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]

Candidate's Signature

3/3/11

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).

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DIRECTOR OF ELECTIONS

For Office Use Only

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Initials

Cash or Check Number

Candidate ID Number

22519

Receipt Number

Office Number