

District Candidate Filing

SEL 190
rev 1/12: ORS 255.235

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Candidate Information			
Candidate Legal Name* Jovan Young		Candidate Name (As it should appear on ballot)* Jovan Young	
Filing for Office of* School Board Member		District and/or position (if applicable)* Centennial School District/ at large 253	
Residence Address, Street/Route* 16901 SE Division St #30			
City* Portland	State* OR	Zip* 97236	County of Residence* Multnomah
Home Phone 503-995-2267	Work Phone 503-321-3120	Cell Phone 503-995-2267	Fax
Email Address* jovan2@pdx.edu		Date of Election*	
Mailing Address (where all correspondence will be sent) Street/Route* 17173 SE Alder St			
City* Portland	State* OR	Zip* 97233	

* Indicates a required field. At least one phone number is also required.

Filing Information
<input checked="" type="radio"/> Filing with the required \$10.00 fee.
<input type="radio"/> Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")	
Occupation present employment – paid or unpaid (required) Mortgage Loan Analyst	RECEIVED 15 MAR 18 PM 1:06 TIM SCOTT DIRECTOR OF ELECTIONS
Occupational Background previous employment – paid or unpaid (required) Residential Treatment Home Manager	

Educational Background schools attended, use attachment if needed (required)			
Complete Name of School (no acronyms)	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
Portland State University	in progress	MA	Real Estate Development
Portland State University		BS	Community Development
Portland Community College		AA	General Studies
Other:			

Required Information (if no relevant information, list "none" or "n/a").

Prior Governmental Experience elected or appointed (required)

Member of the Community Involvement Committee for the Portland Comprehensive Plan Update

By signing this document, I hereby certify that:

- I will qualify for said office if elected
- 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 (not applicable to candidates for federal office - US Senate and US Representative):

- By marking this box, I certify I do not have an existing candidate 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 2012 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 2012 Campaign Finance Manual.

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 and ORS 249.170)

[Handwritten Signature]
 Candidate's Signature

3.18.15
 Date Signed

For Office Use Only

CB
 Initials

096 | 23444
 Cash, Check Number, or credit card approval #

23444
 Receipt #