## Filing of Candidacy for Special District Nomination

**SEL 190** 

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Candidate Information	•			e e		**	
Candidate Name	Filing for Office of						
MARK A. NEB	Position 1 Director						
How Name Should Appear on Ballot	0/ 1// 0	District, Position or Zone Number if applicable  Rural Five Profession District # 305T (Saw)					
HARK A. NE Residence Address, Street/Route	OEKER	1 161m/l	ive projects	on PIHRU	1, 2021 (79	eu/ic.	
	Sarko Tolul	G.Y.			•		
City (O)1/2 (CO)	State Island	Ro. Zip Code	County of Re	sidence	·	_	
Portland	0(ک	97231	Hult				
Home Phone	Work Phone		Celiular Phor	ne		<del>-</del>	
(503)621-1366	(503) 621-	3498 x 225		· · · · · · · · · · · · · · · · · · ·			
Fax Email Address		Date of Election					
	r. & msn. com	Mey	17, 2011				
Mailing Address where all correspondence	ce will be sent, <b>Street/Ro</b>	oute			•		
City	State	Zip Code					
Oily	State	2 ip Code					
Filing Information							
Stiling of candidacy by declaration, with	the required \$10.00 fee.	•					
O Filing of candidacy by petition, with the		e hearing the cignature	e of at least 25 o	actors or at le	act 10%	-	
of the electors residing in the electoral							
Required Information (if no relevant infor				. 5	<u>~</u>		
Occupation present employment - paid o				)	Service		
Oregan book of Fish & Wild							
Occupational Background previous empl	oyment – paid or unpaid				† ·		
Oregon State University					* med		
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				4.14	paratrong St. B		
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Educational Prokaround ashable effects	d use attachment if seed	lod	***************************************	······································			
Educational Background schools attended, use attachment if nee Complete Name of School no acronyms Last Grade Level		Diploma/Degree/Certificate		Course of Study			
•	Completed	(AA, BA, BS, MA, Pho		hD, etc) optional		•	
Oregon State University		BS		Wildlife Science			
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	Rurzi	Fire	Protection	District	# 30 77	- (Son	IN Follows)			
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$\rightarrow$	that I will qua	alify for sa	ent, I hereby state aid office if electe ovided by me on t tal experience, is t	d his form, includ			onal and occupation	onal backgrou	nd,	
	or receive me if total contri Campaign Fi. By marking t	his box, I ore than S butions o nance Ma his box, I	certify I do not ha \$350 during each or total expenditure anual.	calendar year. I es exceed \$350 already filed o	l understand I r D during a caler or will soon file	nust still keep dar year, I mi a Statement (	I do not expect to be records of all cau ust follow the requ of Organization fo	mpaign transe uirements de	ections and tailed in the	
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## Warning

Candidate's Signature

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 Candidate ID Number

Receipt Number Office Number