

Filing of Candidacy for Special District Nomination

SEL 190

rev. 02/11 ORS 258.235

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Candidate Information

Candidate Name Michael C. Jacobson		Filing for Office of Position 2 Director	
How Name Should Appear on Ballot Michael C. Jacobson		District, Position or Zone Number if applicable RFPD D30	
Residence Address, Street/Route 22141 NW Reeder Rd			
City Portland	State OR	Zip Code 97231	County of Residence Multnomah
Home Phone 503-621-3971	Work Phone	Cellular Phone 503-869-4534	
Fax 503-621-1242	Email Address jmikepaula@msn.com	Date of Election May 17, 2011	

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

22141 NW Reeder Rd			
City Portland	State OR	Zip Code 97231	

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

Occupational Background previous employment – paid or unpaid

Assistant Brewmaster at Blitz Weinhard Brewing Company, Portland OR

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 DEPT OF STATE

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 AZ	2 years	Associates Degree	
Seibel Institute of Brewing	2 years	Brewmasters Degree	

Other:

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

Prior Governmental Experience elected or appointed

Board Member for Sauvie Island Fire Department

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

March 1, 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

Cash or Check Number

Candidate ID Number

Receipt Number

Office Number