

Candidate Filing - District - (SEL 190)

This filing is an: Amendment

Next Steps

Filing for office is NOT considered complete until both this form (SEL 190) and filing fee are received by the <u>County Elections Official</u>.

After submitting this form contact your County Elections Official for payment method information. This form and accompanying payment of fees required to be filed with the county clerk must be delivered to and **actually received** at the office of the designated officer not later than 5:00:00 p.m. of the day the document or fee is due.

Office Information

Filing for Office of:

Director, Position 2, Multnomah County Fire District 10

County Where the Administrative Office of the District is Located

Multnomah

District, Position or County:

MULTNOMAH COUNTY FIRE DISTRICT 10

At this time only **Douglas**, **Klamath and Josephine County** accept submissions electronically. For all other counties, please contact directly. Contact information

available at: sos.oregon.gov/county.

Filing Information

Filing with the required \$10.00 fee

Please contact your <u>County Elections Official</u> for payment method information. This form and accompanying payment of fees required to be filed with the county clerk must be delivered to and **actually received** at the office of the designated officer not later than 5:00:00 p.m. of the day the document or fee is due.

Candidacy filing is not complete, until both form SEL 190 and filing fee are received by the County Elections Official.

Candidate Information

Name of Candidate MICHAEL L MCKEEL

How you would like your name to appear on the ballot? MICHAEL MCKEEL

Candidate Residence/Route Address 4350 SE OXBOW PKWY, GRESHAM, Oregon 97080

Is the mailing address different from the residence address?

No

Phone

(503) 799-3841

Fax

(503) 666-0529

Email

gramckeel@hotmail.com

Occupation (present employment)

Occupational Background (previous employment)

PAST DIRECTOR AND CHAIRMAN, MODA HEALTH INC.

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certifica te	Course of Study
OREGON HEALTH & SCIENCES UNIVERSITY UNIVERSITY	,	DMD	DENTAL MEDICINE
PORTLAND STATE UNIVERSITY		BS	PRE MEDICINE
GRESHAM HIGH	12	HIGH SCHOOL DIPLOMA	

Prior Governmental Experience (elected or appointed)

DIRECTOR, GRESHAM-BARLOW SCHOOL DISTRICT
DIRECTOR, MULTNOMAH COUNTY FIRE DISTRICT 10
COMMISSIONER, CITY OF GRESHAM DESIGN REVIEW COMMISSION

Attestation

By signing this document, I hereby state that:

Warning

- I will qualify for said office if elected
- All information provided by me on this form is true to the best of my knowledge

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). A person may only file for one lucrative office at the same election. (ORS 249.013 and ORS 249.170)

I understand that my filing is not complete unless I pay the appropriate fee to the elections filing officer prior to the filing deadline.

Yes

Signature

Date Signed 3/9/2023

Received by County Elections Official:

3/9/2023 7:59 PM