

# 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, Multhomah Education Service District Board

County Where the Administrative Office of the District is Located Multhomah **District, Position or County:** Zone 1, Position 5, Multnomah

At this time only **Douglas**, **Klamath and Josephine County** accept submissions electronically. For all other counties, please contact directly.Contact information available at: <u>sos.oregon.gov/county</u>.

#### **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 Saperstein

How you would like your name to appear on the ballot? Michael Saperstein

Candidate Residence/Route Address 2115 NE Dekum Street, Portland, Oregon 97211

Is the mailing address different from the residence address? No

Phone (503) 481-3717

Email viporone@comcast.net

### Race and Ethnicity (optional)

#### Portland

#### Occupation (present employment) Retired

## **Occupational Background (previous employment)**

Military, PDX Operations, Public Transit Operator, Emergency Medical Technician, Firefighter

## **Educational Background (schools attended)**

Complete name of School	Last Grade completed	Diploma/Degree/Certifica te	Course of Study
Mt Hood Community College	14	Associate	General Studies Degree
Portland Community College	14	Associate	Fire Science Technology Degree
Educational Backgroun	d (other)		

Medical - Undergraduate

International Business - Undergraduate

## Prior Governmental Experience (elected or appointed) None

## Attestation

By signing this document, I hereby state that:

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

## 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. (<u>ORS 260.715</u>). A person may only file for one lucrative office at the same election. (<u>ORS 249.013 and ORS 249.170</u>)

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 3/14/2023