## **Candidate Filing**

**SEL 190** 

District				rev 01/14 ORS 255.235
All information must be comp	leted or the form will be rejec	ted.		
This filing is an	Original Amendmen			
Candidate Information	ert i jan kan kan	<u>. Baring p</u> akabat sa wagiyi		
Name of Candidate			**************************************	
First Nicole	MI Last	Grayson	Suffix	Title
How you would like your name to	appear on the ballot			
First Nicole	MI Last	Grayson	Suffix	
Candidate Residence/Route Addre	Accordance to a first of the SSS Section 1.			
Street Address 12518 SW Iron	Mtn. Blvd.	city Portland	State OR	zip 97219
Candidate Mailing Address			nenty oran orange est my mental area orange est	
Street Address or PO Box		City	State	Zip
<u> </u>	· .			<del></del> -
Contact Information: Only one pho	ne number is required.			
Work Phone H	ome Phone 503-635-8887	Cell Phone	Fax	
Email Address Nicolegray son	@comcast, net	Web Site, if applicable		
Filing Information				
Filing with the required \$10.00 fo	ee			
Prospective Petition				
Office Information			n film military game	
Filing for Office of: School B	pard Prisitiona			a et e 1177.
District, Position or County: Riv		pistrict 51J		
Occupation (present employment) I		•	*	
NA	·	e of the finast be efficied.	<u> </u>	(
1170				
Occupational Background (previous	employment) If no relevant e	xperience, None or NA must be en	tered.	· · .
NA	·			
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Educational Background (schools attended) If	no relevant experience, Non	e or NA must be entered.	
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
University of Oregon		BA	
3 1 3			<u> </u>
· -			
		1	
Educational Background (other) Attach a separ	ate sheet if necessary.	<u> </u>	
Prior Governmental Experience (elected or ap	pointed) If no relevant expe	rience, None or NA must be ente	rea.
NA		•	
•	•	•	•
		and the second of the second o	ing terminal distriction of the second secon
Campaign Finance Information (not applicable	to candidates for federal o	ffice)	<u></u>
Candidate Committee			
Yes, I have a candidate committee.		-	
No, I do not expect to spend more than \$75	60 or receive more than \$750	O during each calendar year. I und	derstand I must still keep
records of all campaign transactions and if t	otal contributions or total ex	penditures exceed \$750 during a	calendar year, I must
follow the requirements detailed in the Can			
No, but will be filing a Statement of Organia	zation for Candidate Commit	tee (SEL 220).	
By signing this document, I hereby state that:			
→ I will qualify for said office if elected	1		
→ all information provided by me on t	his form is true to the best o	f my knowledge	
•		•	
Warning Supplying false information on this for		of a falany with a fine of up to \$1	25 000 and/or prison for
up to 5 years. (ORS 260.715). A perso	orm may result in conviction so may only file for one lucra	tive office at the same election.	iza, doo and/or prison for
(ORS 249.013 and ORS 249.170)	of may only me for one facta		
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Histo Liese I namen	<u> </u>		3/10/15
Candidate's Signature			/ Date Signed
l d	,		:

DIRECTOR OF ELECTIONS

ISMARIO PM 3: 14

For Office Use Only Initials

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HECEINED
CC Approval Code/Receipt Number\_

Section (Int.)

23421