rev 01/14 ORS 255.235

This filing is an	Original		Amendmer	nt	٠	
Candidate Information	÷.					
Name of Candidate						
First Elzy	MI P	Last Edwa	urds		Suffix M.A.	Title
How you would like your name	to appear on the ba	llot				
First	MI	Last			Suffix	· ·
Pat	1	Edwards			M.A.	
Candidate Residence/Route Ad	dress					
Street Address 1202 NE 117th Avenue			City Portland		State OR	Zip 97220
Candidate Mailing Address						·
Street Address or PO Box			City		State	Zip
202 NE 117th Avenue			Portland		OR	97220
Contact Information: Only one	phone number is req	ulred.				
Work Phone	Home Phone		Cell Phone 808 738 6691	Fax		
Email Address			Web Site, if applicable			
epedwards@me.com						•
Filing Information						
Filing with the required \$10.	00 fee	•			-	<del></del>
Prospective Petition			<u> </u>			
Office Information	•					
Filing for Office of: Mount Ho	od Community (	College Br	ard of Directors	·		
District, Position or County: Dis	strict/Zone 3	-5090 DC	01 511001010			
				·		
Occupation (present employme	nt) if no relevant exp	erience, Non	e or NA must be entered.			
Sales Executive		4				
<del></del>	<del></del>		<del></del>			<del> </del>
Occupational Background (prev	ious employment) If	no relevant e	xperience, None or NA must	be entered.		

DAC Corp-VP/General Manager; Washington State Dept. of Corrections- Classification Counselor/ Community Corrections (Parole) Officer; VP/General/Manager- LightPoint Communications; GST International, Japan- Country/General Manager; GST Government Systems- Director; US Marine Corps

Educational Background (schools attended) If no relevant experience, None or NA must be entered.							
Complete name of School (no acronyms) Vational Graduate School	Last Grade completed	Diploma/Degree/Certificate	Course of Study				
vational Graduate School	PhD (2017)	,	Doctorate BusAdmir				
Marylhurst Univ. Graduate School	Masters	M.A.	InterDis/OrgComm				
Marylhurst University	Bachelors	B.A	Interdisciplinary St.				
Aviation HS	12	Diploma	Aviation Technology				

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Elected Board Member- Hazelwood Neighborhood Association

Campaign Finance Information	not applicable to candidates for fed	eral office

## **Candidate Committee**

Yes, I have a candidate committee.

No, 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.

No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

## 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

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

Candidate's Signature

Warch 18, 201 Date Signed

DIBECTOR OF ELECTIONS TIM SCOTT

For Office Use Only Initials

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85: 1 Nd 81 NWS1 CC Approval Code/Receipt Number

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