Filing of Candidacy for Special District Nomination

SEL 190

rev 02/11: ORS 255.235 -> This information is a matter of public record and may be published or reproduced. **Candidate Information** Filing for Office of Candidate Name Paul Francis Capell Mt Hood Community College Board District, Position or Zone Number if applicable How Name Should Appear on Ballot Paul Capell Zone 3 Residence Address, Street/Route 3631 NE 142nd Ave **County of Residence** City State Zip Code **OR** 97230 Multnomah Portland Cellular Phone **Work Phone Home Phone** 503-423-3897 503-308-0331 503-255-0919 **Email Address** Date of Election Fax May 17, 2011 p.capell@comcast.net Mailing Address where all correspondence will be sent, Street/Route PO Box 301295 Zip Code City State 97294 Portland OR Filing Information • Filing of candidacy by declaration, with the required \$10.00 fee. O 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 Regional Energy Program Manager, HDR Engineering Occupational Background previous employment - paid or unpaid General Manager of Energy Business Unit, David Evans and Associates Managing Director of Engineering, PacifiCorp

Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
Bend Senior High School	12		
Oregon State University		BS	Electrical Engineering
Other:		***************************************	

Required Information (if no relevant information, list "none")
Prior Governmental Experience elected or appointed
Planning Commission, Prineville, Oregon
City Council, Prineville, Oregon
Mayor, Prineville, Oregon (1997/1998)

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.

3	/11	/201	(
Date	Signe	d	

Candidate's Signature

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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			
(4)	2623		
Initials	Cash or Check Number	Candidate ID Number	
22551			
Receipt Number	Office Number		