Candidate Filing

District

rev 09/21 ORS 255,235

1 This form must be filed with	county el	ections officia	I. All inforr	nation must be completed o	r the form	will be reje	ected.		. 1
2023 District Election Filing Dates	5								
Candidate Filing February 4, 2023 to March 16, 2023				Withdrawal Date March 16,					
This filing is an	Original			■ At	mendment	:			ı
Office Information									\dashv
Filing for Office of: Commiss	sioner,	Position 5	5	and the state of t			····		
District, Position or County: Alto	Park \	Water Dis	trict						
Filing Information									_
Filing with the required \$10.0	0 fee								
Prospective Petition		400-c					~-		
Candidate Information						<u> 열</u>	222		
Name of Candidate			· · · · · · · · · · · · · · · · · · ·	A CONTRACTOR OF THE CONTRACTOR				ゎ	<u>-23</u>
First		MI	Last	200		Suffici	Gj	H	
Stuart			Lawrer	100	···			H	
How you would like your name	to appear	on the ballot						F	
Stuart A Lawrence						190 000	****	<u> </u>	
<u>ာ</u> ω								.]	
Candidate Residence/Route Address				City		State	Zi	р	
Street Address 1620 Englewood Ct.			Lake Oswego		OR	97	034		
Candidate Mailing Address and	Contact Ir	nformation: At	t least one i	phone number and email add	lress is req	uired.	1		
Street Address or PO Box				City		State	Zì		
1620 Englewood Ct.	_			Lake Oswego		OR	97	034	
Work Phone	Home Phone 5032456597			Cell Phone 5039392077	Fax				
Email Address				Web Site, if applicable					
slmd@easystreet.net									
Race and Ethnicity Optional									
Occupation (present employment	e nt) If no r	elevant experi	ience, None	or NA must be entered.					
NA									
Occupational Background (pre	vious emp	loyment) If no	relevant e	xperience, None or NA must	be entered				······································
Physician									

Educational Background (schools attended) If no Complete name of School (no acronyms) Yale College U. of Colorado School of Medicine	Graduated Graduated	e or NA must be effective Diploma/Degree/Certificate BA	Course of Study Russian Area Studies Medicine
Educational Background (other) Attach a separa	te sheet if necessary.	perience, None or NA must be e	entered.

Educational Background (
	None or NA must be entered.
	I) If no relevant experience, None
ental Experience (elected of appointed	
Prior Governmental Expense	i) If no relevant experience, None or NA must be entered.

NA

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no A candidate must me a statement of Organization not later than three business days of instructioning a contribution of making an expenditure and later than the deadline for filling a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they nater than the deadnine for thing a normhating perition, declaration of candidate, or certificate of normhation, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This

includes changes to the election you are active in and the office you are running for. See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

By signing this document, I hereby state that:

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



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)

02/14/2023

Date Signed

Candidate's Signature