

District Candidate Filing

AUG 25 2014 **SEL 190**
rev 1/12: ORS 265.235

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Candidate Information

Candidate Legal Name* Terry E. Schulz | Candidate Name (As it should appear on ballot)*
Terry Schulz

Filing for Office of* Interlachen Water PUD #4100902 | District and/or position (if applicable)*
Director Sub district #3

Residence Address, Street/Route*
21032 NE. Interlachen Ln

City* Fairview | State* OR | Zip* 97024 | County of Residence*
Multnomah

Home Phone | Work Phone | Cell Phone 971-244-2716 | Fax

Email Address* gales@prodigy.net | Date of Election*
Nov 2014

Mailing Address (where all correspondence will be sent) Street/Route*
21032 N.E. Interlachen Ln

City* Fairview | State* OR | Zip* 97024

* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee.
 Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")
Occupation present employment - paid or unpaid (required)

Occupational Background previous employment - paid or unpaid (required)
Instructor Mt Hood Comm College - paid

Educational Background schools attended, use attachment if needed (required)
Complete Name of School (no acronyms) | Last Grade Level Completed | Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc) | Course of Study optional
Oklahoma State U | | MA |

Other:

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14 AUG 25 AM 8:18
TIM SCOTT
DIRECTOR OF ELECTIONS

Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

12 years Interlachen Water PUD - elected

By signing this document, I hereby certify that:

- I will qualify for said office if elected
- 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 (not applicable to candidates for federal office - US Senate and US Representative):

- By marking this box, I certify I do not have an existing candidate 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 2012 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 2012 Campaign Finance Manual.

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 and ORS 249.170).

Signature redacted

9-21-14

Candidate's Signature

Date Signed

For Office Use Only

Initials

6259
Cash, Check Number, or credit card approval #

23313
Receipt #