Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 12/21 ORS 249.031

Filing Dates	· .			Candidat	e Filing	Candida	ate Withd	rawal	
Primary Election	First Day to File			•	*September 9, 2021				
May 17, 2022	Last Da	-		March 8, 2		March 1	1, 2022		
*Due to the delay in receiving 2020 for office until January 1, 2022.) U.S. Censu	is redist	ricting data, office	s of US Represe	ntative, State Sena	ator and State Rep	presentative	cannot file	
General Election	First Da	-		June 1, 20					
November 8, 2022	Last Da	y to Fil	e 	August 30	, 2022	Septemb	er 2, 2022		
Filing Information				· <u>·</u>					
This filing is an	Orl	ginal		Amend	dment				
Office Information					<u>. </u>				
Filing for Office of: Multnoma	ah Coun	ty Ch	air	,					
District, Position or County:							, <u> </u>		
Party Affiliation:	_		Democration	Party	Republica	n Party	Nonparti	 san	
Incumbent Judge (for Judicial ca	andidates o	nly):	Yes		No		Nondiscl	osure on file	
Filing Method									
■ Fee									
Office	Filing Fe	ee		Office		Filing 6	Fee		
United States President	n/a			District Atto		\$50			
United States Vice President United States Senator	n/a \$150			County Judg		\$50			
United States Representative	\$100			MSD Execut	ive Officer, MAD D	irector \$100 \$25			
Statewide Offices	\$100			County Office		\$23 \$50		İ	
State senator or Representative	\$25			City Office		• • •	harter or or	dinance	
Circuit Court Judge	\$50			Justice of th	e Peace	n/a		į	
Prospective Petition, in lieu	of filing fe	e .	··	Some circu	lators may be pa	ld 🔲 Yes	s [No	
Candidate Information	<u> </u>	<u> </u>				<u> </u>	2022		
Name of Candidate		T : ::							
First		Mi	Last			Suffix 5		200	
Sharon	2"	E	Meiera	n ·			نيات	Ö	
How you would like your name	to appear	on the	ballot				65 65 12 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
Sharon Meieran					 		ကျင် 🕱	S	
Candidate Residence / Route A	ddress			·	<u> </u>				
Street Address			City	<u> </u>	State	Zip 7		unty	
5739 SW Cheltenham D	r		Portland		OR	97239	Mui	tnomah	
Candidate Mailing Address and	Contact Ir	forma	tion Only one pho	ne number and	an emall is require	d.			
Street Address or PO Box			City		State	Zlp			
PO Box 42307	•		Portland	l [']	OR	97242			
Work Phone	Home Pl	hone		Cell Phone		Fax		 -	
			,	971-322-8	B 753				
Email Address				Web Site, if	f applicable				
sharon@votesharon.com	n				aron.com				
Race and Ethnicity Optional	 ,-								

Occupation (present employment) If not employed	f. enter "Not Employed".		
Multnomah County Commissioner	<u>i i i i i i i i i i i i i i i i i i i </u>		,
Emergency Physician, NW Permanent	е		
Occupational Background (previous employment	t) If no relevant experience	, None or NA must be entered.	
Emergency Physician, NW Permanent			
Emergency Physician, Portland Adven	tist Medical Center	•	
Attorney, Brobeck, Phleger and Harriso	on	· · · · · · · · · · · · · · · · · · ·	
Educational Background (schools attended)			·
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
UCSF School of Medicine		MD	Medicine
Hastings School of Law		JD	Law
UC Berkeley		BAs	English & Economics
Educational Background (other) Attach a separate	sheet if necessary.		
Prior Governmental Experience (elected or appo			h., <u>.</u>
Multnomah County Commissioner, Dis	trict 1, 2017-Prese	nt	
•			
			No. 1
Campaign Finance Information Not applicable t	to candidates for federal of	fice.	
·	بالقا ومحتمله وبطاع مسطعة مرسطة ويسما	and of first recolular a contribution	or making an evoquditure and no

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 later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, 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.

Candidate Attestation

By signing this document, I hereby state that:

- → I will accept the nomination for the office indicated above;
- > I will qualify for said office if elected;
- → All Information provided by me on this form is true to the best of my knowledge; and
- → No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

For Major Political Party Candidates

- → if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- → I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filling a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.



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 or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first-filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

Candidate Signature