ORS 251.335

JCVP-01

Joint County Voters' Pamphlet

Candidate Statement

Important! Read all instructions before completing this form.

Please note that each county produces a separate County Voters' Pamphlet. If the jurisdiction or district is located in more than one county, a separate JCVP-01 form must be filed and the filing fee paid to each county where the Candidate Statement is to be printed.

1. Filing Information

Election Date: November 3, 2026 SF ☐ **Amended Statement**

Name of Candidate (As it should appear on the ballot):
Shari Freshman

Filing for the Office of: West Multnomah Soil and Water Conservation

District/Position: Zone 5 SF

"This information furnished by" (Required: Name of Candidate or Committee as it should appear in the Voters' Pamphlet):
Shari Freshman

2. Contact Information

Phone: 503-860-9191

Email: shouse03@gmail.com

Warning: Any person who supplies information in the Required Information portion of a Voters' Pamphlet statement, knowing it to be false, is subject upon conviction of a Class C felony; to imprisonment for up to five years or to a fine of $125,000; or both.

ORS 260.715 (1); 260.993; 161.605; and 161.625.

Note: Language which violates any provision of ORS 251.415 will be excluded from the Voters' Pamphlet.

By signing this document, I hereby state:

- That all information provided by me on this form and in this 'Candidate Statement' is true to the best of my knowledge;
- That I am the author of this 'Candidate Statement' (ORS 251.415);
- That I have read and understand the instructions for submitting this 'Candidate Statement'; and
- That the portrait, if provided, is less than four (4) years old.

2026 AUG 11 PM 1:18

[redacted]

Signature of Candidate or Agent on behalf of Candidate

8-11-2026

Date Signed

(If applicable) Printed name of **Agent**

Phone Number

For Office Use Only

County: _____

Payment Method: _____

Ref. Number: _____

Amount: $_____

Intake Staff Initials: _____

Required Info? Yes No

Optional Info? Yes No

Endorsements? Yes # ____ No

Portrait?

Print? # ____

Providing digital copy? Yes No

Received digital copy? Yes No

None

Word Count (325 max):

Providing digital copy? Yes No

Received digital copy? Yes No

Review Staff Initials:

Candidate Statement for Voters' Pamphlet

3. Candidate Checklist

☑ Typewritten & Signed JCVP-01

Required Information:

- ☐ Occupation
- ☐ Occupational Background
- ☐ Educational Background
- ☐ Prior Governmental Experience

- ☐ Word Count (325 words/numbers MAX)
- ☐ Fee Provided
- ☐ (If applicable) JCVP-02 Endorsement Forms #: _____
- ☐ (Optional) Optional Information
- ☐ (Optional) Portrait Photo

4. Required Information

Candidate Name:

Maximum of 325 hand counted typewritten words/numbers for the combined Required and Optional Information sections, excluding the bold headings already printed on this form. All sections of the Required Information must be completed. If there is not relevant information for a required section, the word "None" should be inserted.

Occupation (present paid or unpaid employment):

Include in Attached Statement

Occupational Background (any previous paid or unpaid employment):

Include in Attached Statement

Educational Background (relevant school(s) attended):

Name of School	Educational Study – Major/Minor	Diploma/Degree/Certificate
Include in Attached Statement ,	**Include in Attached Statement** ,	**Include in Attached Statement** ,
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Prior Governmental Experience (elected or appointed):

Include in Attached Statement

5. Optional Information

Attach a separate sheet with your Optional Information. ***Remember: both your Required and Optional Information count toward the 325-word limit*** *(excluding required information headings).*

Shari Freshman

Occupation:
Family Nurse Practitioner for 45 years (Retired)

Occupational Background:
Small Business Owner, Pearl Health Center (14 years); Legacy Good Samaritan, Resident Training Clinic, Urgent Care Center; Oregon Health Sciences University, Faculty, School of Nursing, Department of Cardiology, Mother-Baby Unit; Colville Indian Reservation, Family Nurse Practitioner; Veteran Administration, Primary Care Clinic, Emergency Room Administration; Cook County Hospital, Emergency Room Nurse.

Educational Background:
University of Illinois, BS Early Education, Teachinng; Boston College, Social Work; Rush University, BA Nursing, Masters Degree, Family Nurse Practitioner

* Prior Gavermental Experience Colville Indian Reservation

Statement:
I've been interested in soil and water conservation since I was a small child. My father taught me to garden on a small square of land on the South Side of Chicago. With no formal education he taught me how to grow flowers and fruit in the dry, smoky Chicago weather. It became part of me. Rachel Carson became my hero. As I grew older, moved to other cities, other living situations, planting something,somewhere was always a necessity. I ultimately moved to Portland because of its great expanse of nature and respect for our environment. For the last 47 years I've lived my dream to manage a half acre of land in Multnomah Village. I learned about the impact of living on a 10 year floodplain, and the importance of landscaping and construction mitigation. This requires balancing local stormwater mandates and city habitat protection. As your Zone 5 West Multnomah Soil and Water Conservation representative I bring the home owner's concerns, experiences and commitment to our role. I strongly believe that one person, one salamander, one tree can make a difference for the better. As a Board of Director my focus will be on clean water, healthy soil and accessible greenspaces.