## District 2.

rev 01/16 ORS 255.235

| All information must be                           | completed or the form will be reject  | ed.                               |           |        |
|---|---------------------------------------|-----------------------------------|-----------|--------|
| This filing is an                                 | 🗹 Original                            | Amen                              | dment     |        |
| Office Information                                |                                       |                                   |           |        |
| Filing for Office of:                             | 1. P. U · D                           |                                   |           |        |
| District, Position or County:  Filing Information | Board Director                        | 615.2                             |           |        |
| X Filing with the required \$1                    | .0.00 fee                             |                                   |           |        |
| Prospective Petition                              |                                       | <u> </u>                          |           |        |
|   |                                       |                                   |           | -      |
| Candidate Information  Name of Candidate          |                                       |                                   |           |        |
| First YUVAL                                       | MI Last                               | GOLAN                             | Suffix    | Title  |
| How you would like your nam                       | ne to appear on the ballot            |                                   |           |        |
| YUVAL GOL   | AN                                    |                                   |           |        |
| Candidate Residence/Route                         | Address                               |                                   | ·         |        |
| Street Address                                    |                                       | City                              | State     | Zip    |
|   | INTERLACHEN Ln.                       | fairview                          | OR.       | 97024  |
|   | nd Contact Information: Only one pho  | 1                                 |           |        |
| Street Address or PO Box                          | V                                     | City                              | State 🗸   | Zip    |
| Work Phone  | Home Phone                            | Cell Phone 8 18 219 6909          | Fax       |        |
| Email Address                                     |                                       | Web Site, if applicable           |           |        |
| YOUALJGOLAN                                       | @ Gmail. Com                          |                                   |           |        |
| •   |                                       |                                   |           | ·      |
| Retired   | nent) If no relevant experience, None | e of wa must be entered.          | DIRECTO   | 707 81 |
| Occupational Background (pro                      | evious employment) If no relevant ex  | operience, None or NA must be ent | ered.     | (°) I  |
| -   | Sprinklers man                        |                                   | ~ <u></u> | EIVED: |
|   |                                       | · ·                               | + 4       |        |

. .

|   | Last Grade completed   | Diploma/Degree/Certificate                             | Course of Study                          |
|---|--|--|--|
| Highschool  | 12   | <del>_</del>   | -  |
|   |  |  |  |
| ducational Background (other) Attach a sepa   | rate sheet if necessary.   |  |  |
| Prior Governmental Experience (elected or a   | ppointed) If no relevant expe  | rience, None or NA must be ente                        | red.                                     |
| I.W.P.U.D Direct  | or   |  |  |
|   |  |  |  |
| Campaign Finance Information (not applicab  | le to candidates for federal o   | mcej   |  |
| Yes, I have a candidate committee.  | <u>·                                      </u>                         |  |  |
| X No. I do not expect to spend more than \$   | 750 or receive more than \$750   | O during each calendar year. I un                      | derstand I must still keep               |
| records of all campaign transactions and if   | total contributions or total ex  | cpenditures exceed \$750 during a                      | a calendar year, I must                  |
| follow the requirements detailed in the Ca  |  |  |  |
|   | t attaches to a constitution of Comments                               | u (¢ci 330)  |  |
| No, but will be filing a Statement of Organ   | nization for Candidate Commi   | ttee (SEL 220).  |  |
|   | nization for Candidate Commi   | ttee (SEL 220).  |  |
| y signing this dacument, I hereby state that:   |  | ttee (SEL 220).  |  |
|   | ed   |  |  |
| y signing this dacument, I hereby state that:  → I will qualify for said office if electe   | ed   |  |  |
| y signing this dacument, I hereby state that:  → I will qualify for said office if electe → all information provided by me on   | ed<br>this form is true to the best o                                  | of my knowledge  |  |
| y signing this dacument, I hereby state that:  → I will qualify for said office if electe → all information provided by me on   | ed<br>this form is true to the best o<br>form may result in conviction | of my knowledge<br>of a felony with a fine of up to \$ | 125,000 and/or prison for                |
| y signing this dacument, I hereby state that:  → I will qualify for said office if elected → all information provided by me on  Warning Supplying false information on this up to 5 years. (ORS 260.715). A personal significance of the second | ed<br>this form is true to the best o<br>form may result in conviction | of my knowledge<br>of a felony with a fine of up to \$ | 125,000 and/or prison for                |
| y signing this dacument, I hereby state that:  → I will qualify for said office if electe → all information provided by me on  Warning Supplying false information on this up to 5 years. (ORS 260.715). A per-   | ed<br>this form is true to the best o<br>form may result in conviction | of my knowledge<br>of a felony with a fine of up to \$ | 125,000 and/or prison for                |
| y signing this dacument, I hereby state that:  → I will qualify for said office if elected → all information provided by me on  Warning Supplying false information on this up to 5 years. (ORS 260.715). A per (ORS 249.013 and ORS 249.170)  Signature redacted   | ed<br>this form is true to the best o<br>form may result in conviction | of my knowledge<br>of a felony with a fine of up to \$ |  |
| y signing this dacument, I hereby state that:  → I will qualify for said office if electe → all information provided by me on  Warning Supplying false information on this up to 5 years. {ORS 260.715}. A per (ORS 249.013 and ORS 249.170)  | ed<br>this form is true to the best o<br>form may result in conviction | of my knowledge<br>of a felony with a fine of up to \$ | 125,000 and/or prison for<br>Date Signed |