Candidate Filing

Major Political Party or Nonpartisan

rev 09/15 ORS 249.031

Filing Dates	Candida	ate Filing	State Vote	rs' Pamphl	et	Candidate Withdrawal	
Primary Election May 17, 2016			Filed electr	onically usin	g ORESTAR		
First Day to File Last Day to File	Septemb March 0	per 10, 2015 8, 2016	January 18 March 10,			March 11, 2016	
General Election November 8, 2016						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
First Day to File June 1, 2016 Last Day to File August 30, 2016			July 11, 2016 August 30, 2016			September 2, 2016	
All information must be comple	ted or the fo	rm will he reiec	ted				
This filing is an		riginal	, tou.	[☐ Amendment		
Filing Officer							
☐ Secretary of State	■ C	ounty Election	s Official		City Records	er (Auditor)	
Office Information							
Filing for Office of: Assessor				·			
District, Position or County: Marion C	ountv						
Party Affiliation: Democratic I		Republican Part	v 🗆 Inde	ependent Pa	rty 🔳 Nonp	particon	
	Yes		No □ No	- portaciti t	· · · · · · · · · · · · · · · · · · ·	closure on file	
Paying by Declaration or Petition	i:				- TOTALO	nocaro or mo	
Declaration, with the required fee					·· re		
Office	Filing Fee	Office			Filing F	ee O si	
United States President	n/a	District Atto	rnev		\$50	ee 6 ANOR	
United States Vice President	n/a	County Jud			\$50 ₁₀		
United States Senator	\$150	MSD Execu	utive Officer, M	AD Director	\$100		
United States Representative	\$100	MSD Counc			\$25	ப் 🥞 💮	
Statewide Offices State senator or Representative	\$100	County Offi	ce		\$50	70	
Circuit Court Judge	\$25 \$50	City Office Justice of th	no Posso		Set by	charter or ordinance	
	Ψ00	Justice of the	reace		n/a.		
Prospective Petition			Petition circu	ators will be	paid	s 🗌 No	
Candidate Information					4 m		
Name of Candidate							
First	MI	Last			S	Suffix Title	
Thomas	D	Rohlf	ing				
How you would like your name to app	pear on the b	allot					
Tom Rohlfing							
Candidate Residence/Route Address							
Street Address	City			State	Zip	County	
1380 Roseway CT SE	Sale	m	I	OR	97302	Marion	
Candidate Mailing Address				<u> </u>	01002	IVIALION	
Street Address or PO Box	City		<u> </u>	State	Zip		
PO Box 3674	Sale	ım:	ļ		•		
O DON OUT	Jaic	111		OR	97302		

97302

OR

Work Phone	Home Phone	Cell P	hone	F	⁼ ax	
503-373-4312						
Email Address		Web S	Site, if applicable			
trohlfing@co.mar	rion.or.us					
Occupation (present em	ployment) If no relevant	experience, None	or NA must be	entered.		
Assessor, Marion Cou	nty					
Occupational Backgroun	nd (previous employme	nt) If no relevant e	xperience, Non	ie or NA mu	st be entere	d.
Senior Commercial Ap						
•						
Educational Background	(schools attended) If no	o relevant experie	nce None or N	A must be a	ntorod	
Complete name of School (no	acronyms) Last	Grade completed	Diploma/Degre			of Study
Portland State University				of Science		Economics
Educational Background (othe	or) Attach a severate also at	r .				
Over 400 hours of appraisal and		•				
Over 21 years of exper	rience (elected or apporience performing apporte	inted) If no releva Praisal, data an	nt experience, l	None or NA anagemer	must be ent	tered. Marion
Over 21 years of exper County Assessor's Office	rience performing app ce.	oraisal, data an	alysis and ma	None or NA anagemer	must be ent	tered. Marion
Over 21 years of exper County Assessor's Office Campaign Finance Inform	rience performing app ce.	oraisal, data an	alysis and ma	None or NA anagemer	must be ent	tered. Marion
Over 21 years of expert County Assessor's Office Campaign Finance Inform Candidate Committee	ience performing app ce. nation (not applicable to	oraisal, data an	alysis and ma	None or NA anagemer	must be entent with the	tered. Marion
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