Candidate Filing

SEL 101

Major Political Party or Nonpartisan

All information must be completed or the form will be rejected.

Filing Dates		Candidate Fili	ng	State Vote	ers' Pamphlet	Candidate W	ithdrawal	
Primary Election May 15, 2018	First Day to File Last Day to File	September 7, 2 March 06, 2018		January 15, March 8, 20		March 9, 2018		
General Election November 6, 2018	First Day to File Last Day to File	May 30, 2018 August 28, 2018	3	July 9, 2018 August 28, 3		August 31, 2	018	
Filing Information	Filing Information							
This filing is an Original Amendment								
Filing Officer Secretary of State			County Elections Official City Recorder (Auditor)					
Office Information								
Filing for Office of:								
District, Position or County:								
Party Affiliation:	Democrati	c Party	Republic	an Party	☐ Independent P	arty Non	partisan	
Incumbent Judge (for	judge candidates or	nly):] Yes		☐ No	☐ Non	disclosure on file	
Payment Information Select how you will pay for your candidacy filing.								
Declaration of Candidacy and required filing fee								
Office United States President United States Vice Pres United States Senator United States Represen Statewide Offices State senator or Repres Circuit Court Judge Prospective Petiti Candidate Informa Name of Candidate First How you would like	ident n/a \$150 tative \$100 \$100 entative \$25 \$50 on, instead of requir	ed filing fee	ıst	MSD Councile County Office City Office Justice of the	e ve Officer, MAD Directo or e	Filing Fee \$50 \$50 \$100 \$25 \$50 Set by charter n/a Yes Suffix	or ordinance No Title	
Candidate Residence	/ Route Address							
Street Address		Ci	ty		State	Zip	County	
Candidate Mailing Address and Contact Information Only one phone number is required.								
Street Address or PO	Box	Ci	ty		State	Zip		
Work Phone	Home F	Phone		Cell Phone		Fax		
Email Address	Web Site, if applicable							

Occupation (present employment) If no relevan	t experience, None or NA mus	Occupation (present employment) If no relevant experience, None or NA must be entered.								
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.										
Educational Background (schools attended) If	no relevant experience, None o	or NA must be entered.								
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study							
Educational Background (other) Attach a separa	te sheet if necessary.									
Prior Governmental Experience (elected or app	pointed) If no relevant experi	ence, None or NA must be entered.								
Campaign Finance Information Not applicable to candidates for federal office.										
Candidate Committee										
Yes, I have a candidate committee. No, I do not expect to spend more than \$750 or a campaign transactions and if total contributions detailed in the Campaign Finance Manual. NOTE: If you have previously filed for office pleated No, but will be filing a Statement of Organization	or total expenditures exceed $\hat{\S}$ ase check with the Elections D	750 during a calendar year, I must for ivision to verify if you have an exist	ollow the requirements							
Candidate Attestation										
By signing this document, I hereby state that: → I will accept the nomination for the office indicat → I will qualify for said office if elected, and → no circulators will be compensated based on the For Major Political Party Candidates → if not nominated, I will not accept the nominatio → I have been a member of said political party, sub nominating petition or declaration of candidacy	number of signatures obtaine on or endorsement of any politi oject to the exceptions stated in	cal party other than the one named n ORS 249.046, for at least 180 days	l before the deadline for filing a							
Warning Supplying false information on this form may (ORS 260.715). A person may only file for on the person has withdrawn from the first filing	e lucrative office or not more t	han one precinct committee persor								
Candidate Signature		Date Signed								
For Office User Only Initials	Batch Sheet/CC Appro	val Code/ Receipt Number								