Filing of Candidacy for Special District Nomination

SEL 190

Marion Co. - Counter

This information is a matter of public rec	MAR 2 1 2019			
Candidate Information Candidate Name		Filing for Office of		
CAROL BINKIN	M	BEAVER C	OCCII INAT	O CONT N
How Name Should Appear on Ballot	7	District, Position or		
CAROL BINKL	04	DIRECTOR	7	
Residence Address, Street/Route			300 300 (0000 100 100 100 100 100 100 100 100	
7570 OCNEY 5C.	52			
City	State	Zip Code	County of Resi	
JAI em	Orc	1 / 31 1	MAR	100
Home Phone	Work Phone		Cellular Phone	
503 -308 389 /		Date of Election		
Fax Email Address	10 Aolan			
Mailing Address where all correspondence	will be sent Street/Br			
Same				
City	State	Zip Code		
Spre	OSC	91	3/7	
Filing Information	TATE	a 2006年100月1日		
Filing of candidacy by declaration, with the	e required \$10.00 fee.			and a second of the
© Filing of candidacy by petition, with the re of the electors residing in the electoral dis	strict for the office (wh	ichever is less), certifie		
Required information (if no relevant information for a comparion present employment – paid or a	94 M.J., 1981 DE NU B		. 택하고 생활하다	
Occupational Background previous employ	ment - paid or unpaid			
Wilco				
4.5 Postac Service	<u>î</u> e			a
Self Employed f	ARM			
Educational Background schools attended, Complete Name of School no acconyms	use attachment if nee Last Grade Level Completed	deci Diploma/Degre (AA, BA, BS, M		Course of Study
Han School	<i>i</i> >	(AA, BA, 65, W		•
Marine Company of the	terror			
			(C //	183

Other:

Required Information (if no relevant information, list "none")

Prior Governmental Experience elected or appointed

Beaver Creek Water

By signing this document, I hereby state:

- → that I will qualify for said office if elected
- → that all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge

Check the applicable box:

- By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than \$350 or receive more than \$350 during each calendar year. I understand must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$350 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the Campaign Finance Manual.

3/19/Z019

Date Signed

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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) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013).



1100 11101 E311 0017 1001

CAROL ANN BINKLEY 7570 OLNEY ST SE SALEM OR 97317

For Office Use Only

Initials

Cash or Check Number

Candidate ID Number

Receipt Number

Office Number