## Marion Co. - Counter

## **Candidate Filing**

**District** 

FEB 1 9 2019

**SEL 190** 

rev 01/16 ORS 255,235

All information must be a	completed or the form	will be reject	ed.			
This filing is an	Ori	ginal		Amendmer	nt	
Office Information						
iling for Office of: Hubbar	d Fire District Boa	rd of Direc	tors			
District, Position or County: H	ubbard Fire Distri	ct, position	1, Marion County			
iling Information						
Filing with the required \$1	0.00 fee					
Prospective Petition						-
Candidate Information						
Name of Candidate		Link to	of the latest of the A			
irst larty	Ri	Sobo			Suffix	Title
low you would like your nam	e to appear on the ba	lot			. Au	
larty Sobo						
andidate Residence/Route A	Address				r	
treet Address 177 Rainbow Loop			City Hubbard		State OR	<sup>Zip</sup> 97032
Candidate Mailing Address ar	d Contact Information	· Only one ph				
	id Contact Information	. Offiny office pin	1		State	Zin
treet Address or PO Box 177 Rainbow Loop			City Hubbard		OR OR	97032
Vork Phone	Home Phone 5039020904		Cell Phone 8184515575	Fax		
	5039020904		·			
mail Address 1 <b>sobo@mac.com</b>			Web Site, if applicable	•		
Occupation (present employm		erience, None	e or NA must be entered			
ech instruction and co	nsulting					
Occupational Background (propple/Mac tech support		no relevant e	xperience, None or NA m	nust be entered.		-4
upple/iviac lecti suppor	Tiol 15+ years.					

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Calabasas High School	12		general
Learning Tree University		certificate	graphic/web design
Musician Institute		certificate	music business
Educational Background (other) Attach a sepa	rate sheet if necessary.		
Prior Governmental Experience (elected or a	nnointed) If no relevant evne	rience None or NA must be ente	red
none	ppointed) if no relevant expe	ience, none of NA must be ente	.rcu.
none			
one Campaign Finance Information (not applicabl			
campaign Finance Information (not applicable	e to candidates for federal of 50 or receive more than \$750 total contributions or total ex	iffice)	derstand I must still keep

By signing this document, I hereby state that:

- → I will qualify for said office if elected
- → all information provided by me on this form is true to the best of my knowledge



## 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). A person may only file for one lucrative office at the same election. (ORS 249.013 and ORS 249.170)

02/19/19

**Date Signed** 



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