Candidate Filing

District

SEL 190

rev 01/16 ORS 255.235

All information must be co	mpleted o	r the form will	be rejecte	ed.				
This filing is an	Original			Amendment				
Office Information								
Filing for Office of: Director	r							
District, Position or County: Jefferson School District, Position 1 Marion Co Counter						unter		
Filing Information					MAI	7 1 5 201	0	
Filing with the required \$10	.00 fee				****	. 10 201	J	
Prospective Petition								
Candidate Information								
Name of Candidate		1						
Sharron		E	Rea			Suffix	Title	
How you would like your name	to appear	on the ballot						
Sharron Rea								
onarron roa								
Candidate Residence/Route Ad	ldress							
554 S. 2nd St				City Jefferson	y	State OR	^{Zip} 97352	
Candidate Mailing Address and	Contact In	formation: On	ly one pho	one number is required.				
P.O. Box 353				City Jefferson		State OR	^{Zip} 97352	
Work Phone n/a	Home Pt 503-9	one 02-2309		Cell Phone 503-902-2309	Fax			
Email Address estelle318@hotmail.c	Web Site, if applicable							
Occupation (present employme	ent) if no re	levant experie	nce. None	or NA must be entered.				
Personal Service Worker								
		·		•				
Occupational Background (prev	ious emplo	wment) If no r	elevant ev	nerience None or NA must	ho entered	0-414-11-12		
Occupational Background (previous employment) If no relevant experience, None or NA must be entered. Accounts Specialist, Office Management, Land Use Planning,								
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Educational Background (schools attended) if	no relevant experience, Non	e or NA must be entered.						
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study					
Chemeketa		n/a	Social Services					
Educational Background (other) Attach a separ	ate sheet if necessary.							
		3						
Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.								
Campaign Finance Information (not applicable	a to candidates for federal of	(fice)						
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 receive more than \$750 during each calendar year. I understand I must still keep								
records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.								
No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).								

By signing this document, I hereby state that:

- → I will qualify for said office if elected
- ightarrow 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)

Date Signed

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SHARRON ESTELLE REA PO BOX 353 JEFFERSON OR 97352-0353

For Office Use Only Initials