rev 01/16 ORS 255.235

This filing is an Original Amendment Office Information Filing for Office of: M. Angel School board District, Position or County: M. Angel School board Filing Information Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First MI J Last CONKLIN How you would like your name to appear on the ballot IOHN J. CONKLIN Candidate Residence/Route Address Street Address Street Address City State Zip HQO L: COLLEGE MT ANGEL OR 97362 Candidate Mailing Address and Contact Information: Only one phone number is required. Street Address or PO Box F. Q. Box 765 MT ANGEL OR 97362 Work Phone Home Phone Cell Phone Fax
Filing for Office of: Mt. Angel School board District, Position or County: Mt. Angel School district, Position #1 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First MI J Last CONKLIN Suffix Title MN J CONKLIN Candidate Residence/Route Address Street Address City State Zip 490 Er Coulage MT Angel City Street Address and Contact Information: Only one phone number is required. Street Address or PO Box City State Zip 97362
District, Position or County: Mt. Angel School district, Position #1 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First JOHN J. Last CONKLIN Suffix Title MN J Last CONKLIN MR How you would like your name to appear on the ballot IOHN J. CONKLIN Candidate Residence/Route Address Street Address City State Zip 490 E: COLLEGE MT ANGEL OR 97362 Candidate Mailing Address and Contact Information: Only one phone number is required.
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Street Address or PO Box City State Zip
Street Address or PO Box P. O. Box 765 MT ANGEL OR 9736Z Work Phone Home Phone Cell Phone Fax
Work Phone Home Phone Cell Phone Fax
503 845 6014 503 851 0571
Email Address Web Site, if applicable
johni conklin @ yahoo.com HA
Occupation (present employment) If no relevant experience, None or NA must be entered.
RETIRED
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
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For Office Use Only Initials

Candidate Filing

District

Marion Co. - Counter

SEL 190

MAR 20 2019

rev 01/16 ORS 255,235

How you would like your name to appear on the ballot John Conklin Candidate Residence/Route Address Street Address 490 East College Mt Angel OR Candidate Mailing Address and Contact Information: Only one phone number is required. Street Address or PO Box City State					
Filing for Office of: School Board Position #For #4 District, Position or County: Mount Angel School District 91 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First John Conklin How you would like your name to appear on the ballot John Conklin Candidate Residence/Route Address Street Address 490 East College Mt Angel OR Candidate Mailing Address and Contact Information: Only one phone number is required. Street Address or PO Box PO Box 765 Mt Angel OR State Work Phone NA Home Phone So 3845 6016 So 3851 0571 NA Email Address Occupation (present employment) If no relevant experience, None or NA must be entered. Cocupational Background (previous employment) If no relevant experience, None or NA must be entered.	Amendment				
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Assistant Professor of Military Science at Southern Oregon University and Oregon Institute of					
echnology July 1992 - July 1997 Stood up the programs from nothing. Duties included: Progroor all University and Oregon Military Academy requirements; Supervision of Program staff; Pr	ram rep				

administrative and management requirements; Lesson Plans, Grading, Record Retention; Teaching all

200-400 level courses except Physical Education

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Marist High School, Eugene	12	Yes	High school completion
Linfield College	13	No	Education
Southern Illinois University	16	Yes	Hospital Administration
Southern Oregon University	16+	No	Secondary Edu
Educational Background (other) Attach a sepa	arate sheet if necessary.		

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Mount Angel Planning Commission 1999-2003x

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
- → 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)

March 19, 2019

Date Signed



JOHN JOSEPH CONKLIN PO BOX 765 MT ANGEL OR 97362 18434739 555

For Office Use Only Initials

