## **Candidate Filing**

6105 8 - 9AM

**SEL 190** 

rev 01/16

## District

| DISTRICT                      |                                    | o Counter                             | Aarion C   | ORS 255.235 |
|-------------------------------|------------------------------------|---------------------------------------|------------|-------------|
| All information must be       | completed or the form will be re   | ejected.                              |            |             |
| This filing is an             | ∠Original                          | Amei                                  | ndment     |             |
| Office Information            |                                    |                                       |            |             |
| Filing for Office of:         | School Board                       |                                       |            |             |
| District, Position or County: | Woodburn Schoo                     | d District 205.                       | 4          |             |
| Filing Information            |                                    |                                       |            |             |
| Filing with the required \$   | 10.00 fee                          |                                       |            |             |
| Prospective Petition          |                                    |                                       |            |             |
| Candidate Information         |                                    |                                       |            |             |
| Name of Candidate             |                                    | A stationary of the same              |            |             |
| First Eric                    | MI W Last                          | <sup>t</sup> Swenson                  | Suffix     | Title       |
| How you would like your na    | me to appear on the ballot         |                                       | To. 17     |             |
| Eric                          | Swenson                            |                                       |            |             |
| Candidate Residence/Route     | Address                            |                                       |            |             |
| Street Address 988 M          | eadouvale In                       | City Woodburn                         | State      | Zip 9767    |
| Candidate Mailing Address a   | and Contact Information: Only on   | e phone number is required.           |            | 145         |
| Street Address or PO Box      | adowi Vale Ln<br>Home Phone        | CityWoodburn                          | State      | Zip 9707    |
| Work Phone                    | Home Phone                         | Cell Phone<br>503-409-1957            | Fax        |             |
| Email Address                 |                                    | Web Site, if applicable               |            |             |
| ericswe                       | nster@gmail ron                    | <u> </u>                              |            |             |
| Occupation (present employ    | ment) If no relevant experience, I | None or NA must be entered.           |            |             |
| Adjunct I                     | nstructor, Pacifi                  | ic University, George                 | For Univer | sity        |
| Occupational Background (p    | revious employment) If no releva   | int experience, None or NA must be en | tered.     |             |
|                               | idministrator.                     |                                       |            |             |
|                               | <i>3</i> 2                         | ,                                     |            |             |
|                               |                                    |                                       |            |             |
|                               |                                    |                                       |            |             |
|                               |                                    |                                       |            |             |

| 1                                                                                                                                                                                                                           |                                                        |                                   |                                                       |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------|-------------------------------------------------------|--|--|--|
| Educational Background (schools attended) If                                                                                                                                                                                | 1                                                      |                                   |                                                       |  |  |  |
| Complete name of School (no acronyms)                                                                                                                                                                                       | Last Grade completed                                   | Diploma/Degree/Certificate        | Course of Study                                       |  |  |  |
| Lewis Clark College                                                                                                                                                                                                         | Masteri -                                              | Public Administration             | 7                                                     |  |  |  |
| Western Oregon State                                                                                                                                                                                                        |                                                        | B.A.                              | Education                                             |  |  |  |
| Univenty of Oregon                                                                                                                                                                                                          | Sophimire                                              |                                   |                                                       |  |  |  |
| Educational Background (other) Attach a separa                                                                                                                                                                              | ate sheet if necessary.                                |                                   |                                                       |  |  |  |
|                                                                                                                                                                                                                             |                                                        |                                   |                                                       |  |  |  |
| Prior Governmental Experience (elected or app<br>City of Woodburn, Budget of<br>City of Woodburn, Porkst<br>City of Woodburn, Ma                                                                                            | Connittee<br>Recreation Board                          | erience, None or NA must be ente  | ered.                                                 |  |  |  |
| 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 records of all campaign transactions and if to follow the requirements detailed in the Cam  No, but will be filing a Statement of Organiza | otal contributions or total e<br>paign Finance Manual. | xpenditures exceed \$750 during a | derstand I must still keep<br>a calendar year, I must |  |  |  |
| By signing this document, I hereby state that:                                                                                                                                                                              |                                                        |                                   |                                                       |  |  |  |
| → I will qualify for said office if elected                                                                                                                                                                                 |                                                        |                                   |                                                       |  |  |  |
| → all information provided by me on the                                                                                                                                                                                     | nis form is true to the best                           | of my knowledge                   |                                                       |  |  |  |
| Warning Supplying false information on this for up to 5 years. (ORS 260.715). A person (ORS 249.013 and ORS 249.170)                                                                                                        |                                                        |                                   | 125,000 and/or prison for                             |  |  |  |
| Candidate's Signature                                                                                                                                                                                                       |                                                        |                                   | 3-8-/9 Date Signed                                    |  |  |  |

18564634 825

ERIC WILLIAM SWENSON 988 MEADOWVALE LN WOODBURN OR 97071

Marion Co. - Counter MAR - 8 2019

For Office Use Only Initials