

**Candidate Filing
Minor Political Party**

SEL 110

rev 09/20
ORS 249.720

2020 General Election Filing Dates

Candidate Filing June 3, 2020 to August 25, 2020	Voters' Pamphlet Filing July 6, 2020 to August 25, 2020	Nomination Withdrawal August 28, 2020
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Filing Information

This filing is an Original Amendment

Office Information

Filing for Office of: Marion County Commissioner District, Position or County: Position 3

Candidate Information

Name of Candidate

First William MI H. Last Johnson Suffix Jr

Nomination Information

Which political party's nomination are you accepting with this filing?

Constitution Independent Libertarian Pacific Green Progressive Working Families

Ballot Order Candidates nominated by multiple political parties may specify the order of the parties printed on the ballot.

Default Order Party of which candidate is a member followed by no more than two additional parties listed in alphabetical order.
 Specified order 1st 2nd 3rd

i If you have previously filed an SEL 101 or electronic candidacy filing with the filing officer for this election cycle, skip to the Candidate Nomination Certificate and Candidate Attestation on the back of this form.

Candidate Information Cont.

How would you like your name to appear on the ballot

William H. Johnson Jr.

Candidate Residence / Route Address

Street Address 254 Northridge Ct. N. City Keizer State OR Zip 97303 County Marion

Candidate Mailing Address and Contact Information

Street Address or PO Box 254 Northridge Ct. N. City Keizer State OR Zip 97305

Work Phone Home Phone Cell Phone 208-830-2522 Fax

Email Address Whjohnsonjr @ outlook. com Web Site, if applicable

Race and Ethnicity Optional

White

Occupation (present employment) If not employed, enter "Not Employed".

Not employed

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

NA

Educational Background (schools attended)

Complete Name of School	Last Grade Completed	Diploma/Degree/Certificate	Course of Study
College of Idaho	BA		Political Science

Educational Background (other) Attach a separate sheet if necessary.

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

None

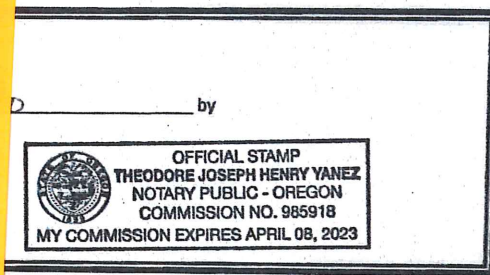
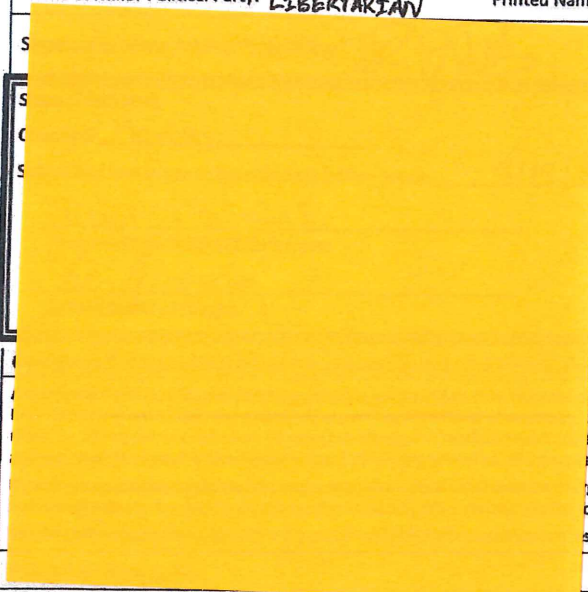
Candidate Nomination Certificate

I swear or affirm the statements on this certificate and any related documents are true.

Name of Minor Political Party: **LIBERTARIAN**

Printed Name of Minor Political Party Officer: **THEODORE PERKINS**

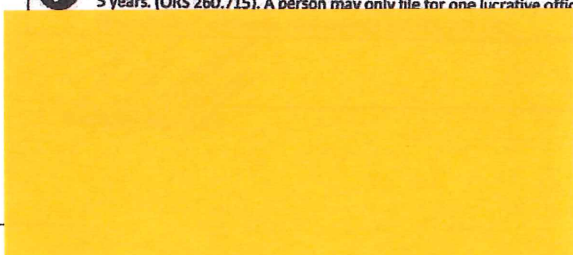
Date Signed **08-19-20**



By signing this document, I hereby state that:

- I will accept the nomination for the office indicated above;
- I will qualify for said office if elected;
- All information provided by me on this form is true to the best of my knowledge; and, if applicable
- I further state that all information provided by me on my previously submitted candidacy filing(s) is true and correct and I understand it will be used for my filing as a minor party candidate.

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. Unless the person has withdrawn from the first



10 Aug 2020
Date