

# Candidate Filing

Major Political Party or Nonpartisan

COUNTER Marion County Clerk  
SEP 23 2025

SEL 101

rev 08/25  
ORS 249.031

| Filing Dates  |                                       | Candidate Filing                      |                         | Candidate Withdrawal                                     |  |
|---|---------------------------------------|---------------------------------------|-------------------------|--|--|
| Primary Election<br>May 19, 2026  | First Day to File<br>Last Day to File | September 11, 2025<br>March 10, 2026* | March 13, 2026          |  |  |
| General Election<br>November 3, 2026  | First Day to File<br>Last Day to File | June 3, 2026<br>August 25, 2026*      | August 28, 2026         |  |  |
| *An incumbent seeking re-election to the same office must file their declaration of candidacy or nominating petition at least seven days before applicable filing deadline for non-incumbent candidates. Incumbent candidates that were appointed to the position they are seeking election to are subject to the same filing deadline as non-incumbent candidates. |                                       |                                       |                         |  |  |
| <b>Filing Information</b>   |                                       |                                       |                         |  |  |
| This filing is an <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment   |                                       |                                       |                         |  |  |
| <b>Office Information</b>   |                                       |                                       |                         |  |  |
| Filing for Office of: Marion County Board of Commissioners  |                                       |                                       |                         |  |  |
| District, Position or County: Position 1  |                                       |                                       |                         |  |  |
| Party Affiliation: <input type="checkbox"/> Democratic Party <input checked="" type="checkbox"/> Republican Party <input type="checkbox"/> Nonpartisan  |                                       |                                       |                         |  |  |
| Incumbent: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Incumbent: <input checked="" type="checkbox"/> Elected** <input type="checkbox"/> Appointed   |                                       |                                       |                         |  |  |
| **If you are an Elected Incumbent, you are subject to an earlier filing deadline!   |                                       |                                       |                         |  |  |
| <b>Filing Method</b>  |                                       |                                       |                         |  |  |
| <input checked="" type="checkbox"/> Fee   |                                       |                                       |                         |  |  |
| <b>Office</b>   |                                       | <b>Filing Fee</b>                     |                         | <b>Office</b>  |  |
| United States Senator   |                                       | \$150                                 |                         | Circuit Court, District Attorney                         |  |
| United States Representative  |                                       | \$100                                 |                         | County Judge   |  |
| Statewide Offices   |                                       | \$100                                 |                         | City Office  |  |
| State Senator or Representative   |                                       | \$25                                  |                         | Justice of the Peace                                     |  |
| <input type="checkbox"/> Prospective Petition, in lieu of filing fee  |                                       | Some circulators may be paid          |                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| <b>Filing Fee</b>   |                                       | <b>Filing Fee</b>                     |                         |  |  |
| Set by charter or ordinance   |                                       | n/a                                   |                         |  |  |
| <b>Candidate Information</b>  |                                       |                                       |                         |  |  |
| <b>Name of Candidate</b>  |                                       |                                       |                         |  |  |
| First   |                                       | MI                                    |                         | Last   |  |
| Kevin   |                                       | M                                     |                         | Cameron  |  |
| How you would like your name to appear on the ballot  |                                       |                                       |                         |  |  |
| Kevin Cameron   |                                       |                                       |                         |  |  |
| <b>Candidate Residence / Route Address</b>  |                                       |                                       |                         |  |  |
| Street Address  |                                       | City                                  |                         | State  |  |
| 425 Clester Rd W  |                                       | Detroit                               |                         | Or   |  |
|   |                                       |                                       |                         | Zip  |  |
|   |                                       |                                       |                         | 97342  |  |
|   |                                       |                                       |                         | County   |  |
|   |                                       |                                       |                         | Marion   |  |
| <b>Candidate Mailing Address and Contact Information</b> Only one phone number and an email is required.  |                                       |                                       |                         |  |  |
| Street Address or PO Box  |                                       | City                                  |                         | State  |  |
| PO Box 2162   |                                       | Salem                                 |                         | Or   |  |
|   |                                       |                                       |                         | Zip  |  |
|   |                                       |                                       |                         | 97308  |  |
| Work Phone  |                                       | Home Phone                            |                         | Cell Phone   |  |
| 5035885212  |                                       | N/A                                   |                         | 5039308212   |  |
| Email Address   |                                       |                                       | Web Site, if applicable |  |  |
| kevin@kevincameronfororegon.com   |                                       |                                       |                         |  |  |
| <b>Race and Ethnicity</b> Optional  |                                       |                                       |                         |  |  |

Continued on page 2 of this form

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

Marion County Commissioner

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

Co-Founder/ CEO Cafe Today LLC, Director of Operations - Vip's Industries, Denny's District Manager,

**Educational Background (schools attended)**

| Complete name of School | Last Grade completed | Diploma/Degree/Certificate | Course of Study |
|-------------------------|----------------------|----------------------------|-----------------|
| University of Colorado  | 1 year of Ex Mba     | N/A                        |                 |
| Oregon State University |                      | BS                         | Marketing       |

**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.

Marion County Commissioner, Oregon State Representative House District 19

**Campaign Finance Information** Not applicable to candidates for federal office.

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$1,500 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the [Campaign Finance Manual](#) for the procedural and legal requirements of establishing and maintaining a candidate committee.

**Residence Address Exemption**

To exempt your residence address from public disclosure, complete form [SEL 180 – Residence Address Exemption Request](#). The request for a Residence Address Exemption MUST include a publicly disclosable mailing address. See the Candidates Manual for further information.

☐ I don't want my residence address to be disclosed. I will be filing a separate [SEL 180 – Residence Address Exemption Request](#).

**Candidate Attestation**

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**
- No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

**For Major Political Party Candidates**

- if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.



**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 or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

**Signature Redacted**

Candidate Signature

Date

9.23.2025