| District | | | | ORS 255.235 | | |
|----------------------------------------|-------------------------------------|--------------------------------|-------------|-------------------------|--|--|
| (1) All information must be co | mpleted or the form will be reject | ted. | | | | |
| This filing is an | ng is an Original | | ☐ Amendment | | | |
| Office Information | 8 | e y e | e - 2 | | | |
| Filing for Office of: Director | , Position 4 | | | | | |
| District, Position or County: Au | rora Rural Fire Protect | ion District | | | | |
| Filing Information | | | | | | |
| Filing with the required \$10. | 00 fee | | | | | |
| Prospective Petition | | | | | | |
| Candidate Information | | | | | | |
| Name of Candidate | | | | | | |
| First Donna | MI Last Hammang | | Suffix | Title | | |
| | | | | | | |
| How you would like your name | to appear on the ballot | | | | | |
| Donna Hammang | | | | | | |
| | | · | | | | |
| Candidate Residence/Route Ad | dress | Tau | | | | |
| Street Address 20950 Feller Street NE | | City Donald | State OR | ^{Zip} 97020 | | |
| Candidate Mailing Address and | Contact Information: Only one ph | none number is required. | | | | |
| Street Address or PO Box PO Box 442 | | City Donald | State OR | Zip 97020 | | |
| Work Phone | Home Phone (503) 678-5417 | Cell Phone (503) 348-6773 | Fax | * | | |
| Email Address | | Web Site, if applicable | | × | | |
| | | | | | | |
| Occupation (present employme | ent) If no relevant experience, Non | e or NA must be entered. | | | | |
| Retired | | | | | | |
| | | | | | | |
| Occupational Background (prev | rious employment) If no relevant e | experience, None or NA must be | entered. | , | | |
| Postmaster of Donald, O | | | | | | |
| Co-Owner of Brightwood Forest Products | | | | | | |
| | | | | | | |
| | | | | | | |

| Educational Background (schools attended) If no relevant experience, None or NA must be entered. | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------|-----------------|--|--|--|
| Complete name of School (no acronyms) | Last Grade completed | Diploma/Degree/Certificate | Course of Study | | | |
| Naselle High School | 12 years | Diploma | General | | | |
| Western Business College | 18-month program | Degree | Accounting | | | |
| | | | | | | |
| | AND THE SECOND | The second section of | . , | | | |
| 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. | | | | | | |
| Aurora Rural Fire Protection District – 27 years City of Donald Planning Commission – 20 years City of Donald Budget Committee – 20 years | | | | | | |
| Campaign Finance Information (not applicable to candidates for federal office) | | | | | | |
| Candidate Committee | 1 2 2 | The said of the first | | | | |
| 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

ALM d36

BILL BURGESS, COUNTY CLERK

77 FEB 29 P12:12

MARION COUNTY, ONEOLIN

For Office Use Only Initials