## Candidate Filing District

**SEL 190** 

rev 01/16 ORS 255.235

All information must be completed or the form will be reject	ed.			
This filing is an	Amendme	nt		
Office Information	_			
Filing for Office of: ST. Paul Fire Dis-	trict Board Mem	ber		
District, Position or County: Position # 1				
Filing Information				
Filing with the required \$10.00 fee				
Prospective Petition				
Candidate Information				
Name of Candidate		1		
First Steven MIE Last	DAVIOSON	Suffix Title		
How you would like your name to appear on the ballot				
Steve Davidson				
STEVE DAVI (1807)				
Candidate Residence/Route Address				
Street Address	City	State Zip		
4608 Davidson Rd NE	ST. PAUL	OR 97137		
Candidate Mailing Address and Contact Information: Only one phone number is required.				
Street Address or PO Box	City	State Zip		
4608 Davidson Rd. NE Work Phone Home Phone	ST. Paul	OR 97137		
503-633-4867 503-633-4867		503-633.4882		
Email Address Web Site, if applicable				
rddavidson @ St. Paultel, com				
Occupation (present employment) If no relevant experience, None or NA must be entered.				
Farmer				
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.				
Farmer				
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Educational Background (schools attended) If no	relevant experience, Nor	e or NA must be entered.	
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
ST. PAUL Parachial	K-8		
ST. PAUL High School	1-4		
Chemeketa Community College	2 trs	Associates	Auto Engineering
Educational Background (other) Attach a separat	e sheet if necessary.	<u> </u>	
Prior Governmental Experience (elected or appo	pinted) If no relevant expe	rience, None or NA must be ente	red.
Campaign Finance Information (not applicable t	o candidates for federal o	ffice)	
Yes, I have a candidate committee.  No, I do not expect to spend more than \$750 records of all campaign transactions and if tot follow the requirements detailed in the Camp  No, but will be filing a Statement of Organizat	al contributions or total ex aign Finance Manual.	openditures exceed \$750 during a	
By signing this document, I hereby state that:			
<ul> <li>→ I will qualify for said office if elected</li> <li>→ all information provided by me on thi</li> </ul>	s form is true to the best o	of my knowledge	
Warning Supplying false information on this formup to 5 years. (ORS 260.715). A person (ORS 249.013 and ORS 249.170)	성용도 없었다. 전 75 시간이 1일 교통한 사람은 요즘 이 것 같아 그렇지 않는 것이 없다면 하셨다. 나를 하는데 없다.	생배 걸었다. 하나의 집에 살아보면 살아보다 하나 하나 되었다면 하는 사람들은 사람들이 되었다면 하다는 것이다. 그렇다 하나 없는 것이다.	125,000 and/or prison for

3-12-17
Date Signed

Marion County Elections MAR 1 5 2017