

**Candidate Filing
District**

SEL 190
rev 01/14
ORS 255.235

E All information must be completed or the form will be rejected.

This filing is an Original Amendment

Candidate Information				
Name of Candidate				
First	MI	Last	Suffix	Title
Tom	J	Frey		

How you would like your name to appear on the ballot			
First	MI	Last	Suffix
Tom		Frey	

Candidate Residence/Route Address			
Street Address	City	State	Zip
8613 Humpert Lane NE	Mt Angel	Or	97362
Candidate Mailing Address			
Street Address or PO Box	City	State	Zip
8613 Humpert Lane NE	Mt Angel	Or	97362

Contact Information: Only one phone number is required.			
Work Phone	Home Phone	Cell Phone	Fax
		503-508-1567	
Email Address		Web Site, if applicable	
tjfrey1@gmail.com			

Filing Information
<input checked="" type="checkbox"/> Filing with the required \$10.00 fee
<input type="checkbox"/> Prospective Petition

Office Information
Filing for Office of: Mt Angel Fire District, Director
District, Position or County: Director Position 1

Occupation (present employment) If no relevant experience, None or NA must be entered.
Information Technology Director Marion County

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
- July 1989-July 2002 IS Manager with MC Public Works - July 2002- May 2003 IT Manager with MC Information Technology Department - May 2003-March 2014 Several senior level IT positions to include IT Deputy Director and IT Program Manager with Marion County - March 2014 to present Information Technology Director with Marion County

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SEL 190

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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
Oregon State University	Graduated in 1985	Bachelor of Science	Computer Science
JFK High School	Graduated in 1980	High School Diploma	General
State Certificated Firefighter 1	1993-2008	Certificate	Firefighter
Oregon Project Management	2005	Certificate	Project Management

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.

Mt Angel Firefighters Association (retired) – Past terms as President and Vice President
 Current President of Mt Angel Fire District Board

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 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
- 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)

Candidate  Date Signed 3-11-2015

DEPT. OF
 BILL BURGESS, COUNTY CLERK
 15 MAR 11 P4:52

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For Office Use Only Initials EBP Code/Receipt Number _____

MAR 09 2015

SEL 190

rev 01/14
ORS 255.235**Candidate Filing**
District**i** All information must be completed or the form will be rejected.

This filing is an

 Original Amendment**Candidate Information****Name of Candidate**

First	MI	Last	Suffix	Title
Darin		Unrein		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Darin		Unrein	

Candidate Residence/Route Address

Street Address	City	State	Zip
595 S Pershing St	Mt. Angel	OR	97362

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
595 S Pershing St	Mt. Angel	OR	97362

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
503-982-2360	503-845-6528	503-910-0269	

Email Address	Web Site, if applicable
darin@woodburnfire.com	

Filing Information Filing with the required \$10.00 fee Prospective Petition**Office Information**

Filing for Office of: Director for Mt. Angel Fire District

District, Position or County: 2

Occupation (present employment) If no relevant experience, None or NA must be entered.

Lieutenant with Woodburn Fire District

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

Firefighter, Fire Chief, Welder, Sales & Service

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SEL 190

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OCUR
GAD

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
Chemeketa Community College	Graduated	AS	Fire Suppression

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.

Board of Directors for Mt. Angel Fire District

Campaign Finance Information (not applicable to candidates for federal office)

Candidate Committee

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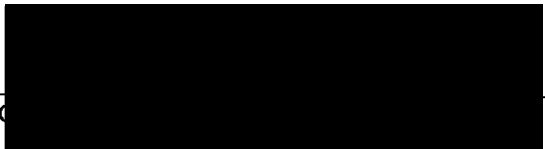
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3-5-15

Date Signed

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BILL BURGESS, COUNTY CLERK

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FILED MAR 10 2015 HANCOCK COUNTY, OREGON

CC Approval Code/Receipt Number

Candidate Filing
District

SEL 190

rev 01/14
ORS 255.235

1 All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

Candidate Information				
Name of Candidate				
First	MI	Last	Suffix	Title
Philip	L	Wiesner		

How you would like your name to appear on the ballot			
First	MI	Last	Suffix
Philip		Wiesner	

Candidate Residence/Route Address			
Street Address	City	State	Zip
11010 Saratoga Dr NE	Salem	OR	97305

Candidate Mailing Address			
Street Address or PO Box	City	State	Zip
11010 Saratoga Dr NE	Salem	OR	97305

Contact Information: Only one phone number is required.			
Work Phone	Home Phone	Cell Phone	Fax
	503-873-6780	503-508-3328	

Email Address	Web Site, if applicable
wiesnerpl@gmail.com	

Filing Information
<input checked="" type="checkbox"/> Filing with the required \$10.00 fee
<input type="checkbox"/> Prospective Petition

Office Information
Filing for Office of: Director for Mt. Angel Fire District
District, Position or County: 3

Occupation (present employment) If no relevant experience, None or NA must be entered.
Retired teacher/Farmer

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

D

OCUP
4/2

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
Oregon State University	Graduated	BS	Education

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.

Budget Committee for Mt. Angel Fire District
 Board of Directors for Mt. Angel Fire District

Campaign Finance Information (not applicable to candidates for federal office)

Candidate Committee

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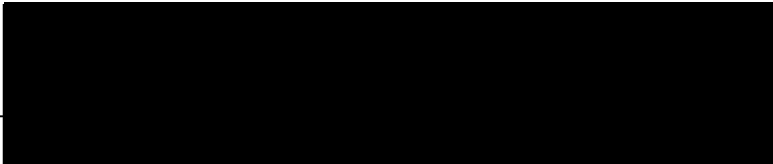
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2-23-15

Date Signed

DEF. CLERK
 BILL JURGESS, COUNTY CLERK
 15 FEB 25 09:05

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CC Approval Code/Receipt Number

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