

**Candidate Filing
District**

SEL 190

rev 01/16
ORS 255.235

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

This filing is an

Original

Amendment

Office Information

Filing for Office of: **Board of Directors, Sublimity Fire district**

District, Position or County: **Marion County**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Michael	T	Bocshler		

How you would like your name to appear on the ballot

Michael Bochsler

Candidate Residence/Route Address

Street Address	City	State	Zip
11862 Valerie Lane SE	Aumsville	OR	97325

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
PO Box 147	Sublimity	OR	97385

Work Phone	Home Phone	Cell Phone	Fax
503-767-7777	503-767-7057	503-871-6094	

Email Address	Web Site, if applicable
mbochsler@farmersagent.com	

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

Farmers Insurance and Financial Services agent

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

NA

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
Western Oregon University		Bachelors of Science	Business Management
Linn Benton Community College		Associates degree	Business administration

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.

NA

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's Signature

Date Signed

2/15/2017

DEPUTY
BILLY BURGES, COUNTY CLERK
17 FEB 28 AM 12:24
FILED
MARION COUNTY, OREGON

For Office Use Only Initials CA