

**Candidate Filing
District**

SEL 190

rev 12/24
ORS 255.235

i This form must be filed with county elections official. All information must be completed or the form will be rejected.

2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

2025 FEB 28 16:04

This filing is an

Original

Amendment

Office Information

Filing for Office of: **BOARD MEMBER**

District, Position or County: **UMATILLA HOSPITAL DISTRICT**

Pos #5

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

BRUCE

MI

D

Last

CARLSON

How you would like your name to appear on the ballot

DR. BRUCE CARLSON

Candidate Residence/Route Address

Street Address

1551 2ND STREET

City

UMATILLA

State

OR

Zip

97882

Candidate Mailing Address and Contact Information

Street Address or PO Box

1551 2ND STREET

City

UMATILLA

State

OR

Zip

97882

Work Phone

NONE

Home Phone

(541)922-4967

Cell Phone

(541)561-1039

Email Address

bcarlson57@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

caucasian

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

Retired

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

RETIRED FAMILY PRACTICE PHYSICIAN

Educational Background (schools attended) If no relevant experience, None or NA must be entered.			
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Marshfield High School	12	Diploma	PRE -COLLEGE
OREGON STATE UNIVERSITY	SENIOR	BS	PHARMACY
MEDICAL COLLEGE OF WISCONSIN	SENIOR	MD	MEDICINE
OREGON HEALTH SCIENCES UNIVERSITY	2ND YEAR		GENERAL AND INTERNAL MEDICINE
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 member of Umatilla Hospital District for past 20 years.

Campaign Finance Information
 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 \$750 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 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. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

2/10/2025
 Date Signed