Candidate Filing District		16 21	SEL 190 rev 01/16 ORS 255.235
All information must be completed or the form will be re	ejected.	MR 8 18	Ona 235.235
This filing is an Original	_	Amendment	
Office Information			
Filing for Office of: Helix Cemetery			
District, Position or County: Position 1			
Filing Information			
🔀 Filing with the required \$10.00 fee	4	, <u>, , , , , , , , , , , , , , , , , , </u>	
Prospective Petition			
Candidate Information		2007	
Name of Candidate			
Matthew MIR Last	Wood	Suffix	Title
How you would like your name to appear on the ballot			
matthew R. Wood			
Candidate Residence/Route Address			
Street Address 46269 Hudemann 1	Rd City Adams	State OR	<sup>Zip</sup> 9781 C
Candidate Mailing Address and Contact Information: Only on	e phone number is required.		
Street Address or PO Box 46269 Hudemann Rd	city Adams	State	9181c
Work Phone Home Phone 541- 377- 7111	Cell Phone 541-377 - 7111	Fax	
Email Address	Web Site, if applicable		
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Occupation (present employment) If no relevant experience,			·
farmer, building contrac	ctir		
1.0011011			
Occupational Background (previous employment) If no releva	ent experience None or NA must	he entered	
Occupational packground (previous employment) if 110 releva	ant experience, Hone of HA must	De Uniter eur	

Educational Background (schools attended) If		a ar NA must be entered	
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
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Educational Background (other) Attach a sepa	rate sheet if necessary.		
	(A) 1 (A)		
Prior Governmental Experience (elected or a	pointed) If no relevant expe	ience. None or NA must be ente	red.
The determinated experience (elected of a)	ppointed in no relevant expe	reflect Hoste of Avenuar be effect	
<b>Campaign Finance Information (not applicabl</b>	e to candidates for federal o	ffice)	
Candidate Committee			* * * * * * * * * * * * * * * * * * *
Yes, I have a candidate committee.			
Yes, I have a candidate committee.  No, I do not expect to spend more than \$7	50 or receive more than \$750	during each calendar year. I un	derstand I must still keep
No, I do not expect to spend more than \$7 records of all campaign transactions and if	total contributions or total ex	_	
No, I do not expect to spend more than \$7 records of all campaign transactions and if follow the requirements detailed in the Car	total contributions or total ex mpaign Finance Manual.	penditures exceed \$750 during a	
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(ORS 249.013 and ORS 249.170)

3/7/21

**Date Signed** 

For Office Use Only Initials \_\_\_\_\_\_ 3646

## **District** All information must be completed or the form will be rejected. V Original This filing is an Amendment Office Information Filing for Office of: District, Position or County: **Filing Information** Filing with the required \$10.00 fee **Prospective Petition Candidate Information** Name of Candidate Suffix Title First Thorne How you would like your name to appear on the ballot Candidate Residence/Route Address Street Address Candidate Mailing Address and Contact Information: Only one phone number is required. Street Address or PO Box Work Phone Home Phone Cell Phone Cell Phone S41-310-9038 **Email Address** Occupation (present employment) If no relevant experience, None or NA must be entered. Contractor Occupational Background (previous employment) If no relevant experience, None or NA must be entered. Extensive

Candidate Filing

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
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ampaign Finance Information (not applicable	e to candidates for federal o	ffice)	
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