HEPPNER WATER CONTROL DISTRICT

Candidate Filing District

2025-3 MA

SEL 190

rev 12/24 ORS 255.235

1 This form must be filed with co	unty elections official. All info	ormation must be comple	ted or the form v	vill be rej	ected.
2025 District Election Filing Dates				7 177 7 177	
Candidate Filing February 8, 2025 to	March 20, 2025	Withdrawal Date Marc	h 20, 2025		
This filing is an	Original		Amendment		
Office Information					
Filing for Office of: Aeppres	- Water Contra	ol District,	Direct	or .	
District, Position or County: Mc	- Water Contra	At Larg	e		
Filing Information					
Filing with the required \$10.00 fe	e				
Prospective Petition					
Candidate Information					
Name of Candidate					
First	MI	L	ast Perr	u	
Joseph	// (/		1011	1	
How you would like your name to a					
Jue Pe	rry				
Candidate Residence/Route Address	S				
Street Address		City	S	tate	Zip
440 Water St	t,	Heppne		OR	97836
Candidate Mailing Address and Cont	tact Information	The state of			
Street Address or PO Box		City	S	tate	Zip
P.O. Box 952		Heppne		OR	97836
Work Phone	Home Phone	1.	ell Phone		
NA	NA		509-67	1-6	020
Email Address		Web Site, if applicable			
joe. Perry 76@	yAmoo, com	N/	A		
Race and Ethnicity Optional					
NA					
Occupation (present employment) If	no relevant experience, None	or NA must be entered.			
Retired					
Occupational Background (previous	employment) If no relevant ex	perience, None or NA mus	st be entered.		
Commercial L	LOAN DEFicer	BANK of E	Eastern	Dre	gon

Educational Background (schools attended) If no	rolovant ovnerience Non	e or NA must be entered			
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study		
Pasco High School	12	Diploma	Geneval		
10/00/10/10/10/10	1/2	BA Degree	Economics		
11-121-01111	18	mA Dogge	Ac. Econ		
Washington State Univi	70	min begive	19,120,0		
Educational Background (other) Attach a separate	sheet if necessary.	3			
Pacific Coast BANKing	, School				
Prior Governmental Experience (elected or appo	inted) If no relevant expe	rience, None or NA must be ente	red.		
Willow Creck Part Bear.					
Willow Creck Part Dean	7-1/				
Morrow County Health Dis	t. Board 11				
Campaign Finance Information					
A candidate must file a Statement of Organization not l later than the deadline for filing a nominating petition, meet the criteria for an exemption. To meet the criteria and not expect to spend or receive more than \$750 du	declaration of candidacy, or a, the candidate must serve a	certificate of nomination, whichever is their own treasurer, not have an e	occurs first, unless they xisting candidate committee,		
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 <u>SEL 180 – Residence Address Exemption Request</u> . 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 re (ORS 260.715). A person may only file for one I filings are invalid. (ORS 249.013 and ORS 249.1	ucrative office at the same el	with a fine of up to \$125,000 and/o ection. Unless the person has withd	r prison for up to 5 years. rawn from the first filing, all		

Cano

Candidate Filing District

MAR 12 2025 2025-44

SEL 190

rev 06/24 ORS 255.235

Candidate Filing July 18, 2024 to	August 27, 2024	Withd	rawal Dat	e August 27, 2024		
This filing is an	Original			Amendm	ent	
Office Information						
Filing for Office of:	tor					
District, Position or County:	sonor Water C	ontrol	Dist	riet -	At Lan	5e
Filing Information	ppila co					
Filing with the required \$10.00) fee					
Prospective Petition						
Candidate Information Name of Candidate						
First Judith	MI 7			Last \mathcal{B}	arber	-
How you would like your name to	appear on the ballot					
Judy P	barber					
Candidate Residence/Route Add	ess					
Street Address 60071 Hann	na- Arbuckle	City	H	teppner	State	^{Zip} 9783
Candidate Mailing Address and C	ontact Information					
Street Address or PO Box 60071 Hanna-Arb	uckle Rd	City	H	eppner	State	zip 47836
Work Phone	Home Phone 541 3	11 6	700	Cell Phone 54	1 371	6700
Email Address barber Judith 5	is Og mail con	Web S	ite, if appl	icable		
Race and Ethnicity Optional						
					26	
Occupation (present employmen	t) If no relevant experience,	None or NA n	nust be en	tered.		
self. Employe	ed					
Occupational Background (previo	us employment) If no releva	nt experience	e, None oi	NA must be entere	ed.	
lived on the ra	nch most of	my 1	ife			

Educational Background (schools attended) If no	relevant experience, None	e or NA must be entered.			
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study		
Heppner high School	12 +1	Diploma			
Br. Mt Com. Collage	1 yrs	None	ago		
,	1		J		
			<u></u>		
Educational Background (other) Attach a separate	e sheet if necessary.				
Prior Governmental Experience (elected or appo	inted) If no relevant exper	ience, None or NA must be ente	red.		
Currently an elect a	prointed of	disoctor of			
		600000			
*	AMCD				
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 disclosur Residence Address Exemption MUST include a publicly					
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				
→ 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)					
A THE RESERVE AND ADMINISTRATION OF THE PARTY OF THE PART					