LIBRARY DISTRICTS

MR 20205

2025-70

SEL 190 rev 02/25

rev 02/25 ORS 255.235

Candidate Filing February 8, 2025 to March 2 This filing is an Office Information		Withdrawal Date M	arch 20, 2025		
	M Outstand				
Office Information	Original	No. of the control of	Amendme	ent	
Filing for Office of: OTLD					
District, Position or County: Position 3					
Filing Information					
Filing with the required \$10.00 fee	Segiliani in a market in energy men	Office and the state of the spanning of the sp			
Prospective Petition					
Candidate Information Name of Candidate					
First	MI		Last		
Stephanie	K		Case		
How you would like your name to appear on	ı the ballot				
Stephanie Case					
Candidate Residence/Route Address					
Street Address		City		State	Zip
1390 SE Riverview A	ve	Irrigon		OR	97844
Candidate Mailing Address and Contact Info	r mation Do not us		n exempt from d		
Street Address or PO Box		City		State	Zip
1390 SE Riverview A	ve	Irrigon		OR	97844
Work Phone	Home Phone		Cell Phone		
541-481-9252					
Email Address		Web Site, if applicab	ole		
ephy.stang@gmail.c	om				
Race and Ethnicity Optional					
Nace and Emmery Opposition					
Occupation (present employment) If no rele	/ant experience, N	lone or NA must be entere	<u>₃d.</u>		
Principal Planner					
Occupational Background (previous employ	ment) If no releva	int experience, None or NA	\ must be entere	d.	
Morrow County, planning, Veterans			Idamo, and a second		

Complete name of School EOU		1 - 1 /m /	C C C C C C C C C C C C C C C C C C C
FOLL	Last Grade completed	Diploma/Degree/Certificate	Course of Study
		BS	General
Riverside High School	12	Diploma	General
El			
Educational Background (other) Attach a sepa	arate sneet it necessary.		
Prior Governmental Experience (elected or a	appointed) If no relevant expe	ience, None or NA must be ente	red.
OTLD - Director Elected			
TED DIRECTOR Elected			
			100000
Campaign Finance Information			
			making an aynanditure and r
A candidate must file a Statement of Organization ater than the deadline for filing a nominating peti	not later than three business day	s of first receiving a contribution or increasing whichever	making an expenditure and i coccurs first, unless they
neet the criteria for an exemption. To meet the c	riteria, the candidate must serve a	s their own treasurer, not have an e	xisting candidate committee
and not expect to spend or receive more than \$1,5	500 during the entire calendar yea	r (including in-kind contributions an	d personal funds).
f you have an existing candidate committee you n	must amend the statement of orga	nization not later than 10 days after	r a change in information. Th
includes changes to the election you are active in			
See the Campaign Finance Manual for the procedu	ural and legal requirements of esta	ablishing and maintaining a candidat	te committee.
Residence Address Exemption			
To exempt your residence address from public dis	closure, complete form <u>SEL 180 –</u>	Residence Address Exemption Requ	est. The request for
a Residence Address Exemption MUST include a p			
I don't want my residence address to be o	disclosed. I will be filing a separ	ate <u>SEL 180 – Residence Address Ex</u>	
			emption Request.
			emption Request.
Candidate Attestation			emption Request.
Candidate Attestation By signing this document, I hereby state that: → I will qualify for said office if elected;			emption Request.
Candidate Attestation By signing this document, I hereby state that: → I will qualify for said office if elected;	true to the best of my knowledge		emption 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 Warning			
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 Warning Supplying false information on this form n	nay result in conviction of a felony	with a fine of up to \$125,000 and/o	or prison for up to 5 years.
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 Warning Supplying false information on this form in (ORS 260.715). A person may only file for	nay result in conviction of a felony one lucrative office at the same e	with a fine of up to \$125,000 and/o	or prison for up to 5 years.
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3/20/2025 Date Signed

Candidate Filing

2025-41 MAR 1 0 2025

SEL 190

rev 12/24 ORS 255.235

District

1 This form must be filed with county el	ections official. All info	rmation must be comp	oleted or the form	n will be reje	cted.
2025 District Election Filing Dates					
Candidate Filing February 8, 2025 to March	20, 2025	Withdrawal Date M	arch 20, 2025		- C.
This filing is an	Original		Amendmen	t	
Office Information					
Filing for Office of: Director	- Position	4			"
District, Position or County: Orego	o Trail Lib	wary Bistone	+		
Filing Information		J			
Filing with the required \$10.00 fee					1
Prospective Petition					
Candidate Information Name of Candidate					
First	MI		Last	mai)
How you would like your name to appear o	n the ballot				
Monica	Coleman		3		
Candidate Residence/Route Address					
Street Address		City		State	Zip
301 SW Wren C	t	Boalman		OL	97818
Candidate Mailing Address and Contact Inf	ormation				
Street Address or PO Box		City		State	Zip
301 SW when C	t	Boa anas		OL	97818
Work Phone	Home Phone		Cell Phone		
	321-266	e-2996			
Email Address	and the second	Web Site, if applicabl	e		
Manical Colonar	@ gnail.4	m			
Race and Ethnicity Optional	U				
white					×
Occupation (present employment) If no rel	evant experience, None	or NA must be entere	d		
Permit Coordinator					
Occupational Background (previous employ	yment) If no relevant ex	perience, None or NA	must be entered.	2	
211/					

Educational Background (schools attended) If no	o relevant experience, Non	e or NA must be entered.	
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
University of Cortral FL		Bachelors	Cominal Tistic
Merritt Island High School	12th	McGengal dictorna	several ex
			Ja Car Ce
Educational Background (other) Attach a separat	e sheet if necessary.		
Prior Governmental Experience (elected or appo	inted) If no relevant expe	ience, None or NA must be enter	ed.
15/10			
NIA			
			C NOVE OF METHOD ASSUMPTION OF THE PROPERTY OF
Campaign Finance Information			
A candidate must file a Statement of Organization not	later than three business day:	s of first receiving a contribution or m	aking 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 criteri and not expect to spend or receive more than \$750 du	a, the candidate must serve a ring the entire calendar year i	s their own treasurer, not have an ex- lincluding in-kind contributions and n	isting candidate committee,
If you have an existing candidate committee you must			_ =
includes changes to the election you are active in and t	he office you are running for.	The state of the s	onange in information. This
See the Campaign Finance Manual for the procedural a	nd legal requirements of esta	blishing and maintaining a candidate	committee.
Residence Address Exemption			
To exempt your residence address from public disclosu	re, complete form SEL 180 – I	Residence Address Exemption Reques	t. The request for a
Residence Address Exemption MUST include a publicly	disclosable mailing address. S	ee the Candidates Manual for furthe	r information.
I don't want my residence address to be discle	osed. I will be filing a separ	ate <u>SEL 180 – Residence Address Exe</u>	mption 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 le	esult in conviction of a felony	with a fine of up to \$125,000 and/or	prison for up to 5 years.
filings are invalid. (ORS 249.013 and ORS 249.1	70)	section, offices the person has withdra	wit from the first filing, all
			,

2-19-25 Date Signed

MAR 17, 2025 2025-56

SEL 190 rev 02/25 ORS 255.235

Candidate Filing February 8, 2025 to Mar	rch 20, 2025	Withdrawal Date	March 20, 2025		
This filing is an	Original		Amendme	ent	
Office Information					
Filing for Office of: Board of Direct	ion, Position 5	,		,	
District, Position or County: Oregon 7	rail Library Dis	strict			
Filing Information					
Filing with the required \$10.00 fee					
Prospective Petition					
Candidate Information Name of Candidate					
First	MI		Last		
William	J		Kuhn		
How you would like your name to appea	r on the ballot				
William J. Kuhn					
Candidate Residence/Route Address					
Street Address		City		State	Zip
235 W. Baltimore St.		Heppner		Or.	97836
Candidate Mailing Address and Contact I	nformation Do not us	I	en exempt from d		T
Street Address or PO Box		City		State	Zip
P.O. Box 428		Heppner		Or.	97836
Work Phone	Home Phone		Cell Phone	7 0 4 7 7	
541-676-9141		1	541-377	'-94 <i>11</i>	
Email Address		Web Site, if applica	able		
wjk@kuhnlawoffices.co	m				
Race and Ethnicity Optional					
-					
Occupation (present employment) If no r	elevant experience, N	one of NA must be ente	rea.		
Attorney					
Occupational Background (previous emp					

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Cameron County High School, Emporium, PA	12		
Pennsylvania State University	4 years	BA in Political Science and History	
Lewis and Clark Law School	3 years	Juris Doctor	
Educational Background (other) Attach a separa	te sheet if necessary.		

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Twenty years on the Oregon Trail Library District Board/eleven years Morrow County School Board/ Attorney for Cities of Heppner, Ione, and Irrigon/Attorney for Morrow County School Board/ Attorney for West Extension Irrigation District.

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 \$1,500 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 <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.

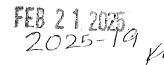
Candidate Attestation

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



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)



SEL 190 rev 02/25

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 Withdrawal Date March 20, 2025 Candidate Filing February 8, 2025 to March 20, 2025 Original Amendment This filing is an Office Information Fore Library Board At Large Filing for Office of: District, Position or County: **Filing Information** Filing with the required \$10.00 fee Prospective Petition **Candidate Information** Name of Candidate Last First MI Campbell How you would like your name to appear on the ballot Campbell Candidate Residence/Route Address City Street Address State Zip 97843 Ione 67396 Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure. Street Address or PO Box State Zip 97843 Home Phone Cell Phone Work Phone <u>541-432、7/19</u> web Site, if applicable **Email Address** Race and Ethnicity Optional Occupation (present employment) If no relevant experience, None or NA must be entered. Potred Occupational Background (previous employment) If no relevant experience, None or NA must be entered. Library Tech Hepfner Ele.

Educational Background (schools attended) If no	relevant experience, Non		
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
The Dallis. High Solver	12	Diploma	High School
		V	
Educational Background (other) Attach a separate	shoot if necessary		
Educational Background (other) Attach a separate	: Silect if flecessary.		
NA			
Prior Governmental Experience (elected or appoi	inted) If no relevant expe	ience, None or NA must be ente	red.
		,	
Ione Library Board	electe	d	
, .			
Campaign Finance Information			
A candidate must file a Statement of Organization not la	ator than three husiness day	of first receiving a contribution or i	making an expenditure and no
later than the deadline for filing a nominating petition, o	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 a	s their own treasurer, not have an e	xisting candidate committee,
and not expect to spend or receive more than \$1,500 du	• • • • • • • • • • • • • • • • • • • •		
If you have an existing candidate committee you must a includes changes to the election you are active in and th			a change in information. This
See the Campaign Finance Manual for the procedural an			e committee.
Residence Address Exemption			
To exempt your residence address from public disclosur	e, complete form SEL 180 –	Residence Address Exemption Requ	est. The request for
a Residence Address Exemption MUST include a publicly	disclosable mailing address	. See the Candidates Manual for furt	her information.
I don't want my residence address to be disclos	sed. I will be filing a separa	ate <u>SEL 180 – Residence Address Ex</u>	emption 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 t	o the best of my knowledge		
Warning			envison for up to 5 years
Supplying false information on this form may res (ORS 260.715). A person may only file for one lu-	sult in conviction of a felony crative office at the same ele	with a fine of up to \$125,000 and/o ection. Unless the person has withdr	awn from the first filing, all
filings are invalid. (ORS 249.013 and ORS 249.17			
San	<u>with the first of the first of the Ad</u>		<u>a angan garatat da ang 17,000 ta 1,11 an Al-Cada</u>

Cai

2 - 21-25 Date Signed

2025 - 27 FEB 28 2025

rev 06/24 ORS 255.235

This form must be filed with county elections official. All information must be completed or the form will be rejected. 2024 District Election Filing Dates Withdrawal Date August 27, 2024 Candidate Filing July 18, 2024 to August 27, 2024 Amendment Original This filing is an Office Information one Library Filing for Office of: District, Position or County: **Filing Information** Filing with the required \$10.00 fee **Prospective Petition Candidate Information** Name of Candidate Sherer MI First Margo How you would like your name to appear on the ballot **Candidate Residence/Route Address** State Street Address EONE **Candidate Mailing Address and Contact Information** Zip State City Street Address or PO Box Cell Phone Home Phone Work Phone 541-571-5857 Web Site, if applicable **Email Address** Margo sherer@gmail.con Race and Ethnicity Optional Occupation (present employment) If no relevant experience, None or NA must be entered. Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

Educational Background (schools attended) If no	relevant experience, None	e or NA must be entered.	La contra
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
High School-Odes SAW	A 12+h	Diploma	General Study
	t if we need carry		
Educational Background (other) Attach a separate	e Sheet ii Hecessai y.		
Prior Governmental Experience (elected or apportunity Treasurer, Iov	pinted) If no relevant exper	ience, None or NA must be ente	red. lected
Campaign Finance Information			
A candidate must file a Statement of Organization not later than the deadline for filing a nominating petition meet the criteria for an exemption. To meet the criteriand not expect to spend or receive more than \$750 du	, declaration of candidacy, or ia, the candidate must serve a	certificate of nomination, whichever s their own treasurer, not have an e	existing candidate committee,
If you have an existing candidate committee you must includes changes to the election you are active in and	amend the statement of orga the office you are running for	nization not later than 10 days afte	r a change in information. This
See the Campaign Finance Manual for the procedural	and legal requirements of esta	ablishing and maintaining a candida	te committee.
Residence Address Exemption		The state of the s	
To exempt your residence address from public disclose Residence Address Exemption MUST include a publicly	disclosable mailing address.	See the Candidates Manual for furth	ier information.
I don't want my residence address to be disc	losed. I will be filing a sepa	rate <u>SEL 180 – Residence Address E</u>	xemption 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.	e to the best of my knowledge	•	
Warning Supplying false information on this form may (ORS 260.715). A person may only file for one filings are invalid. (ORS 249.013 and ORS 249.	lucrative office at the same e	with a fine of up to \$125,000 and/ lection. Unless the person has witho	or prison for up to 5 years. drawn from the first filing, all

2-28-25

Date Signed

Candidate Filing

District

2025-61 MAR 19 2025

SEL 190

rev 02/25 ORS 255.235

Candidate Filing February 8, 2025 to Ma	rch 20, 2025	Withdrawal Date	March 20, 2025		
This filing is an	X Original		Amendme	nt	
Office Information					
Filing for Office of: Lone Li	brary Dist	vict -at-ho	irgl		
District, Position or County:	7		Ü		
Filing Information					
Filing with the required \$10.00 fee	· · · · · · · · · · · · · · · · · · ·				
Prospective Petition					
Candidate Information Name of Candidate					
First	MI GIP	e e	Last		
Elizabeth	CHANC () W	leters	m	
How you would like your name to appea	r on the ballot				
Elizabeth Petersi					
Candidate Residence/Route Address					
Street Address		City	Y.	State	Zip
01789 Ridge Bd		. Iona		OR_	9784
Candidate Mailing Address and Contact II	nformation Do not use	e an address that has be	en exempt from dis	closure.	
Street Address or PO Box		City		State	Zip
101789 Ridge Rd		Lone		OR	9 184
Vork Phone	Home Phone		Cell Phone		
541 422 7414	541 561	8116	541 5	01 8114	0
mail Address		web Site, if applica			
112032964@ gmail, co)/\~				
Race and Ethnicity Optional					
a .	heli	augustiina eninenn Akster			a, e, e all. 1014
	The second second second second	Standig of the first and the decay.			dr. Fiel u.Schie. Die
Occupation (present employment) If no re			red.		
ly of Ione Cuty	Admini strate	O.C.			

11 11 11 11 11	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Univ. Of Parland	Sr.	Business	Busines
Ione Schools	5r.	- Comment	~
,			
	a		
Educational Background (other) Attach a separ	ate sheet if necessary.		
Prior Governmental Experience (elected or ap	nointed) If no relevant expe	ience. None or NA must be ente	red
Thor dovernmental Experience (elected of ap	- elected	terroe) frome of the timest 20 junior	
Ione School Board Morrow County Plann	Creation of the	1 and led	
Morrow County Planni	ng Comission	-Apgsounted	
,)		
Campaign Finance Information			
A candidate must file a Statement of Organization no	at later than three husiness days	of first receiving a contribution or n	naking an expenditure and no
later than the deadline for filing a nominating petition	n, declaration of candidacy, or o	certificate of nomination, whichever	occurs first, unless they
meet the criteria for an exemption. To meet the crite	eria, the candidate must serve a	s their own treasurer, not have an ex	isting candidate committee,
and not expect to spend or receive more than \$1,500			
If you have an existing candidate committee you muincludes changes to the election you are active in and		nization not later than 10 days after	a change in information. This
See the Campaign Finance Manual for the procedura	l and legal requirements of esta	blishing and maintaining a candidate	e committee.
See the Campaign Finance Manual for the procedura Residence Address Exemption	l and legal requirements of esta	blishing and maintaining a candidate	committee.
Residence Address Exemption To exempt your residence address from public disclo	sure, complete form <u>SEL 180 – I</u>	Residence Address Exemption Reque	st. The request for
Residence Address Exemption	sure, complete form <u>SEL 180 – I</u>	Residence Address Exemption Reque	st. The request for
Residence Address Exemption To exempt your residence address from public disclo	sure, complete form <u>SEL 180 — I</u> icly disclosable mailing address.	Residence Address Exemption Reque See the Candidates Manual for furt	st. The request for ner information.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a publ	sure, complete form <u>SEL 180 — I</u> icly disclosable mailing address.	Residence Address Exemption Reque See the Candidates Manual for furt	st. The request for ner information.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a publ I don't want my residence address to be disc	sure, complete form <u>SEL 180 — I</u> icly disclosable mailing address.	Residence Address Exemption Reque See the Candidates Manual for furt	st. The request for ner information.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a public I don't want my residence address to be discusted address to be	sure, complete form <u>SEL 180 – I</u> icly disclosable mailing address closed. I will be filing a separa	Residence Address Exemption Reque See the Candidates Manual for furt	st. The request for ner information.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a public of the control of the c	sure, complete form <u>SEL 180 – I</u> icly disclosable mailing address closed. I will be filing a separa	Residence Address Exemption Reque See the Candidates Manual for furt	st. The request for ner information.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a public of I don't want my residence address to be disconce address to be disconc	sure, complete form <u>SEL 180 – I</u> icly disclosable mailing address.closed. I will be filing a separa	Residence Address Exemption Reque See the Candidates Manual for furti Ite <u>SEL 180 – Residence Address Exe</u>	st. The request for ner information. mption Request.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a public of I don't want my residence address to be disconce address to be disconc	sure, complete form <u>SEL 180 – I</u> icly disclosable mailing address. closed. I will be filing a separate to the best of my knowledge result in conviction of a felony	Residence Address Exemption Reque See the Candidates Manual for furt ate SEL 180 – Residence Address Exe with a fine of up to \$125,000 and/or	st. The request for ner information. mption Request. prison for up to 5 years.
Residence Address Exemption To exempt your residence address from public disclo a Residence Address Exemption MUST include a public of I don't want my residence address to be disconce address to be disconc	sure, complete form SEL 180 — I icly disclosable mailing address. closed. I will be filing a separate to the best of my knowledge result in conviction of a felony a lucrative office at the same electric same elec	Residence Address Exemption Reque See the Candidates Manual for furt ate SEL 180 – Residence Address Exe with a fine of up to \$125,000 and/or	st. The request for ner information. mption Request. prison for up to 5 years.

3 /19 /2025 Date Signed

MAR 20 2025 2025 - 72

SEL 190

rev 02/25 ORS 255.235

pro National Agents and National Agents	rith county elections official. All i	nformation must be com	pleted or the forn	n will be reje	ected.
2025 District Election Filing Da Candidate Filing February 8, 20		Withdrawal Date M	larch 20, 2025		di Balah di dina Jesara Tanggaran
This filing is an	Original		Amendmen	t	
Office Information					
Filing for Office of:	ione library	a board			
District, Position or County:	Morrow C	Dunty	AtLO	irge	
Filing Information		V		0	
Filing with the required \$10	.00 fee				· · · · · · · · · · · · · · · · · · ·
Prospective Petition					
Candidate Information Name of Candidate					
First	MI		Last	•	
Ann	γ		Claba	ugh	
How you would like your name	to appear on the ballot			Ú	
Ann Claba	ugh				
Candidate Residence/Route Ac	ldress				
Street Address		City		State	Zip
315 E. Mail	n	Ione		DR	97148
and the second s	I Contact Information Do not use	an address that has beer	n exempt from disc	closure.	
Street Address or PO Box		City		State	Zip
P.D. BOX 3	62	Ione		OR	971148
Work Phone	Home Phone		Cell Phone		
			503-51	QD-8	277
Email Address		web Site, if applicabl			
claboughann	Ogmail.com				
Race and Ethnicity Optional					
<u> Amerikan di Kabupatèn Barungan Barungan Barungan Barungan Barungan Barungan Barungan Barungan Barungan Barung</u>	<u>- 1 - 11 - 11 - 1 - 1 - 1 - 1 - 1 - 1 -</u>	<u> </u>			
Occupation (present employme	ent) If no relevant experience, No	ne or NA must be entered			
	NA				
Occupational Background (prev	ious employment) If no relevant	experience, None or NA r	nust be entered.		
	\mathcal{N}	A			

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
NA			
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Educational Background (other) Attach a s	separate sheet if necessary.		
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Prior Governmental Experience (elected o	or appointed) If no relevant expen	ience, None or NA must be ente	red <u> </u>
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Campaign Finance Information			
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