

FIRE DISTRICTS

**Candidate Filing
District**

FEB 18 2025
2025-12

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

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: **Board Member** *At Large*

District, Position or County: **Boardman Fire Rescue District**

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

MI

Last

Lisa

Ann

Pratt

How you would like your name to appear on the ballot

Lisa Pratt

Candidate Residence/Route Address

Street Address

City

State

Zip

78583 Tyler Lane

Boardman

OR

97818

Candidate Mailing Address and Contact Information

Street Address or PO Box

City

State

Zip

PO Box 1302

Boardman

OR

97818

Work Phone

Home Phone

Cell Phone

541-571-6333

Email Address

Web Site, if applicable

lisapratt78@gmail.com

Race and Ethnicity *Optional*

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

Self Employed

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

N/A

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
North Salem High School	12	Diploma	

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.

I have served on the Boardman Fire Rescue District since July of 2021. - Elected

Campaign Finance Information

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Residence Address Exemption

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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



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2.7.25

Date Signed

**Candidate Filing
District**

2025-50

SEL 190

rev 02/25
ORS 255.235

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Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

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☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: **Director, At Large**

District, Position or County: **Boardman Fire and Rescue District**

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Michael

MI

Joseph

Last

Sowa

How you would like your name to appear on the ballot

Michael Sowa

Candidate Residence/Route Address

Street Address

71827 Meadow Loop

City

Boardman

State

OR

Zip

97818

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

71827 Meadow Loop

City

Boardman

State

OR

Zip

97818

Work Phone

541-481-7330

Home Phone

Cell Phone

541-571-1892

Email Address

mikesowa@ix.netcom.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

Columbia River Processing, Inc. (2011-present)

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

US Navy (1989-2011)

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
Oregon State University, Corvallis, OR	Undergraduate	Bachelor of Science	Nuclear Engineering
Woodburn High School, Woodburn, OR	12	HS Diploma	General Studies

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.

None

Campaign Finance Information

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3/3/2025

Date Signed

**Candidate Filing
District**

2025-55
MAR 17 2025

SEL 190

rev 02/25
ORS 255.235

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Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: **Board Member**

District, Position or County: **Boardman Fire Rescue District**

At Large

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Jaimesen

MI

S

Last

Ratzlaff

How you would like your name to appear on the ballot

James Ratzlaff

Candidate Residence/Route Address

Street Address

105 Rome Street

City

Boardman

State

OR

Zip

97818

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

City

State

Zip

Work Phone

Home Phone

Cell Phone

714-717-2384

Email Address

Ratz4375@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

Morrow County Grain Growers - Maintance

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

NONE

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
Bellflower High School	12	Diploma	

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.

NONE

Campaign Finance Information

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Can

3/11/25

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**Candidate Filing
District**

2025-65

MAR 20 2025

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☐ **Amendment**

Office Information

Filing for Office of: **Boardman Fire & Rescue District**

District, Position or County: **at Large**

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Stanley

MI

K.

Last

Chaffin

How you would like your name to appear on the ballot

Stan Chaffin

Candidate Residence/Route Address

Street Address

74857 Toms Camp Road

City

Boardman

State

OR

Zip

97818

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

74857 Toms Camp Road

City

Boardman

State

OR

Zip

97818

Work Phone

Home Phone

Cell Phone

541-571-2833

Email Address

stan.keithrn@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

Registered Nurse

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

**Registered Nurse; Emergency Room RN
Registered Nurse; US Army (Combat Nurse)
Fire Fighter; US Forest Service (Hot Shot)**

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
Hood River Valley HS	12	Diploma	General Studies
Portland State University	16	BS	Education
Mercy School of Medicine-Nursing	19	Diploma	RN

Educational Background (other) Attach a separate sheet if necessary.

US Army (AMEDD) Medical Detachment Certificate - Combat (CSH) Nursing

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

Registered Nurse; Emergency Room RN
Registered Nurse; US Army (Combat Nurse)
Fire Fighter; US Forest Service (Hot Shot)

Campaign Finance Information

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**Candidate Filing
District**

FEB 27 2025
2025-24

SEL 190

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: Director - Heppner Rural Fire Protection District

District, Position or County: Heppner Rural Fire Protection District

At Large

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Michael

MI

P.

Last

Mahoney

How you would like your name to appear on the ballot

Michael P. Mahoney

Candidate Residence/Route Address

Street Address

59140 Clarks Canyon Road

City

Heppner

State

Oregon

Zip

97836-6211

Candidate Mailing Address and Contact Information

Street Address or PO Box

59140 Clarks Canyon Road

City

Heppner

State

Oregon

Zip

97836-6211

Work Phone

Home Phone

541-676-5157

Cell Phone

541-561-8419

Email Address

rodeasand racks@gmail.com

Web Site, if applicable

Race and Ethnicity Optional

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

Self-Employed Rancher.

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

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
Heppner High School	12	Diploma	

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.

Current Director - Heppner Rural Fire Protection District — Elected

Campaign Finance Information

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02-26-25

Date Signed

**Candidate Filing
District**

FEB 27 2025
2025-25

SEL 190
rev 12/24
ORS 255.235

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an ☒ **Original** ☐ **Amendment**

Office Information

Filing for Office of: **Director - Heppner Rural Fire Protection District**

District, Position or County: **Heppner Rural Fire Protection District** *At Large*

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last
Eric	M.	Orem

How you would like your name to appear on the ballot

Eric M. Orem

Candidate Residence/Route Address

Street Address	City	State	Zip
72028 Blackhorse Canyon Lane	Heppner	Oregon	97836-0246

Candidate Mailing Address and Contact Information

Street Address or PO Box	City	State	Zip
72028 Blackhorse Canyon Lane	Heppner	Oregon	97836-0246

Work Phone	Home Phone	Cell Phone
	541-989-9808	541-256-0246

Email Address	Web Site, if applicable
eboremfarms@hotmail.com	

Race and Ethnicity Optional

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

Self-Employed Rancher.

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

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
Ione High School	12	Diploma	
Blue Mountain Community College	14	Associates Degree	Marketing / Mgnt.

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.

Current Director - Heppner Rural Fire Protection District - Elected

Campaign Finance Information

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02-26-25

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Candidate Filing
District

2025-53

SEL 190

rev 02/25
ORS 255.235

MAR 17 2025

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: Heppner
Rural Fire Dept. Board Director

District, Position or County: At Large

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First Brian MI S. Last Thompson

How you would like your name to appear on the ballot

SAME Brian S Thompson

Candidate Residence/Route Address

Street Address	City	State	Zip
<u>55805 Highway 74</u>	<u>Heppner</u>	<u>OR</u>	<u>97836</u>

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box	City	State	Zip
<u>SAME</u>			

Work Phone	Home Phone	Cell Phone
<u>541-980-5045</u>	<u>—</u>	<u>—</u>

Email Address	Web Site, if applicable
<u>pioneeragproducts@gmail.com</u>	

Race and Ethnicity *Optional*

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

Rancher

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

N/A

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
Oregon State University		Bach of Science	Ag Econ.

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.

Morrow County Planning Comm. - Appointed
Heppner Rural Fire Dist. Board - Elected

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Date Signed

**Candidate Filing
District**

2025- 42

MAR 10 2025

SEL 190

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Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

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☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: **Irrigon Rural Fire Protection District Director**

District, Position or County: **Postion 1**

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

MI

Last

Thomas

R

Arbuckle

How you would like your name to appear on the ballot

Tom Arbuckle

Candidate Residence/Route Address

Street Address

182 NW Washington ave

City

Irrigon

State

OR

Zip

97844

Candidate Mailing Address and Contact Information

Street Address or PO Box

182 NW Washington ave

City

Irrigon

State

OR

Zip

97844

Work Phone

Home Phone

Cell Phone

503-516-0704

Email Address

Tarbuckle1970@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

None

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

Volunteer Firefighter / Equipment Manager with Irrigon Fire Department 2017 to 2022.

Volunteer Ambulance Driver with Morrow County Health Department 2019 to 2022.

Candidate Filing
District

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2025-48

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Withdrawal Date March 20, 2025

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of:

1

District, Position or County:

IRFPD

Irrigon RFPD

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Robert

MI

Evan

Last

Purves

How you would like your name to appear on the ballot

Evan Purves

Candidate Residence/Route Address

Street Address

81884 Pleasant view Rd.

City

Irrigon

State

OR

Zip

97844

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

81884 Pleasant view Rd.

City

Irrigon

State

OR

Zip

97844

Work Phone

Home Phone

Cell Phone

541-701-6683

Email Address

epurves06@hotmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

City of Irrigon

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	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Irrigon Jr/Sr high School	11	graduate in June	N.A.
N.A.	N.A.	N.A.	N.A.
N.A.	N.A.	N.A.	N.A.
N.A.	N.A.	N.A.	N.A.

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.

N.A.

Campaign Finance Information

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Residence Address Exemption

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☐ 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

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Date Signed

**Candidate Filing
District**

FEB 18²⁰²⁵
2025-8

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

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: **Director Position 3**

District, Position or County: **Irrigon Rural Fire District**

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Joseph

MI

A

Last

Munkers

How you would like your name to appear on the ballot

Jocely Munkers

Candidate Residence/Route Address

Street Address

144 W Hwy 730

City

Irrigon

State

OR

Zip

97844

Candidate Mailing Address and Contact Information

Street Address or PO Box

144 W Hwy 730

City

Irrigon

State

OR

Zip

97844

Work Phone

Home Phone

Cell Phone

541-656-6364

Email Address

Web Site, if applicable

Race and Ethnicity Optional

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

Morrow County Health District

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

**14 years IRFPD
EMS**

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
JSSHS	12	Diploma	

Educational Background (other) Attach a separate sheet if necessary.

CPR/First Aid Instructor, OPSSS Fire I, EOC

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

None

Campaign Finance Information

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2-18-25

Date Signed

**Candidate Filing
District**

FEB 19 2025
2025-15 BC

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

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of:

Director, Position 3

District, Position or County:

IRRIGON Rural Fire Dept. Protection District.

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

MI

Last

Robert (Bob)

L.

Vandecar

How you would like your name to appear on the ballot

Robert (Bob) Vandecar

Candidate Residence/Route Address

Street Address

City

State

Zip

81570 W 8th Rd

IRRIGON

Ore

97844

Candidate Mailing Address and Contact Information

Street Address or PO Box

City

State

Zip

81570 W 8th Rd

IRRIGON

Ore

97844

Work Phone

Home Phone

Cell Phone

541-922-2633

541-571-1140

Email Address

Web Site, if applicable

VANDECARS @ MSN.COM

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.

IBEW L.U Business Rep.

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
Burnt River High School	12 th Grade	High School Diploma	
Eastern Oregon Univ.	1 year	N/A	Engineering
Univ. of Oregon	3 years	B.S. Degree	Business Statistics
IBEW 112 Apprenticeship program	4 years	Journeyman Electrician	Electrical
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.

20 years - Oregon State Building and Construction Trades Council
8 years - Irrigon Rural Fire Protection District.

Campaign Finance Information

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2/13/25

Date Signed

Candidate Filing

District

43291

2025-16

FEB 20 2025

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

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of:

District, Position or County:

Irrigon Rural Fire Protection District Director position 4

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Scott

MI

A

Last

Ezell

How you would like your name to appear on the ballot

Scott Ezell

Candidate Residence/Route Address

Street Address

75159 West Oregon LN

City

Irrigon

State

ORE

Zip

97844

Candidate Mailing Address and Contact Information

Street Address or PO Box

75159 West Oregon LN

City

Irrigon

State

ORE

Zip

97844

Work Phone

Home Phone

Cell Phone

541-922-7610

Email Address

ScottEzell@aol.com

Web Site, if applicable

Race and Ethnicity Optional

White

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

Port of Morrow Automation Engineer

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

Fire Fighter IRFPd, US NAVY 1990-1994,
EMT Moco HD, BMCC Adult Instructor

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
Oregon Institute of Tech		AAS	Electronics Eng
Klamath Community		Journeyman	Electrical
Boise State		Journeyman	Electrical
BMCC		Emergency tech	EMT-

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.

Irrigon Rural Fire protection Board member
Morrow County Health district. Board member
Oregon Apprenticeship Council member

Campaign Finance Information

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2/20/25

Date Signed

**Candidate Filing
District**

2025-51

SEL 190

rev 02/25
ORS 255.235

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ **Original**

☐ **Amendment**

Office Information

Filing for Office of: Irrigon Rural Fire Protection District

District, Position or County: Director, Position 5

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Stephen

MI

B

Last

Henthorn

How you would like your name to appear on the ballot

Stephen Henthorn

Candidate Residence/Route Address

Street Address

75175 W Oregon Ln.

City

Irrigon

State

Or

Zip

97844

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

75175 W Oregon Ln.

City

Irrigon

State

Or

Zip

97844

Work Phone

Home Phone

Cell Phone

801-668-5117

Email Address

sbhenthorn@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

N/A

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

N/A

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
R.A. Long High	11	GED	

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.

Morrow County Planning Commission Position 3

Campaign Finance Information

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3/13/25

Date Signed

Candidate Filing
District

2025-54
MAR 17 2025

SEL 190

rev 02/25
ORS 255.235

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: Irrigon Rural Fire Protection District Director

District, Position or County: Position 5

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Paul

MI

E

Last

Martin

How you would like your name to appear on the ballot

Paul Martin

Candidate Residence/Route Address

Street Address

175 S.E. Eighth Ct.

City

Irrigon

State

OR

Zip

97844

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

Same as above

City

State

Zip

Work Phone

Home Phone

Cell Phone

(509) 460-8332

Email Address

ffmedic926@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

White

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

Paramedic, EMS Director, Morrow County Health District

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

Paramedic Fire Fighter - Paid full time Training Captain Cascade Locks Fire Department
Paramedic - Full time Training Officer - Pacific West Ambulance
Flight Paramedic - Life Flight

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
Columbia Basin College	AAS	Degree & Certificate	Paramedic

Educational Background (other) Attach a separate sheet if necessary.

Teacher for Paramedic, Nursing, Respiratory Therapy, Physician Assistant - Various Programs

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

None

Campaign Finance Information

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3-17-25

Date Signed

Candidate Filing
District

FEB 12 2025

2025-4 ^{KB}

SEL 190

rev 12/24
ORS 255.235

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: DIRECTOR

District, Position or County: IOWA RURAL FED. PROTECTION DISTRICT

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

TIMOTHY

MI

H

Last

HOLTZ

How you would like your name to appear on the ballot

TIM HOLTZ

Candidate Residence/Route Address

Street Address

65151 TEWSELN

City

IOWA

State

OR

Zip

97843

Candidate Mailing Address and Contact Information

Street Address or PO Box

SAME

City

State

Zip

Work Phone

541 379 2815

Home Phone

541 422-7163

Cell Phone

541-379-2815

Email Address

timholtz@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

SELF

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

FARMER

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
EASTERN OREGON STATE COLLEGE	12	BS ACCOUNTING	ACCOUNTING
JOHN HIGH SCHOOL	12		

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.

JOHN RUPPE FINE INSPECTOR - ELECTED

Campaign Finance Information

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2/12/25

Date Signed

**Candidate Filing
District**

FEB 13 2025
2025-7

YB

SEL 190
rev 06/24
ORS 255.235

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

2024 District Election Filing Dates

Candidate Filing July 18, 2024 to August 27, 2024

Withdrawal Date August 27, 2024

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: Ione Rural Fire Protection District

District, Position or County: at large

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Joel

MI

Robert

Last

Peterson

How you would like your name to appear on the ballot

Joel R Peterson

Candidate Residence/Route Address

Street Address

65528 Halvorsen Ln

City

Ione

State

OR

Zip

97843

Candidate Mailing Address and Contact Information

Street Address or PO Box

P.O. Box 302

City

Ione

State

OR

Zip

97843

Work Phone

541-561-7496

Home Phone

Cell Phone

541-561-7496

Email Address

joelra2@mac.com

Web Site, if applicable

Race and Ethnicity Optional

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
Pacific Lutheran Univ.		Degree	BS Engineering Physics
Jone High School	12	B	

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.

Jone School Board - elected
Morrow County Planning Commission - appointed
Jone Fire District - elected
Port of Morrow - appointed

Campaign Finance Information

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Candidate Filing
District

MAR 20 2025
2025-69

SEL 190

rev 02/25
ORS 255.235

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2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

☒ Original

☐ Amendment

Office Information

Filing for Office of: Town Rural Fire Dept.

District, Position or County: At Large

Filing Information

☒ Filing with the required \$10.00 fee

☐ Prospective Petition

Candidate Information

Name of Candidate

First

Jason

MI

G

Last

Proudfoot

How you would like your name to appear on the ballot

Jason Proudfoot

Candidate Residence/Route Address

Street Address

69848 Proudfoot R2

City

Town

State

OR

Zip

97743

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

69848 Proudfoot R2

City

Town

State

OR

Zip

97743

Work Phone

541 422 7249

Home Phone

Cell Phone

541 314 5845

Email Address

jsproudfoot@hotmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

Farmer

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

None

43561

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
Jones High School	12	Diploma	
University of Idaho		B.S.	Ag

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.

Jones Rural Fire Dept. - Elected

Campaign Finance Information

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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)

March 20, 2025

Date Signed