## **Candidate Filing**

District

CLACKAMAS COUNTY ELECTIONS 2025 FEB 10 AM11:30;28 190

rev 12/24

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 Amendment Original This filing is an Office Information Filing for Office of: Commissioner District, Position or County: Sunrise Water Authority, Zone 5 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate Last MI First O'Meara Р Kevin How you would like your name to appear on the ballot Kevin O'Meara Candidate Residence/Route Address State Zip City Street Address 97086 Happy Valley OR 12550 SE Hadeed Dr. Candidate Mailing Address and Contact Information Zip State Street Address or PO Box City 97086 OR Happy Valley 2550 SE Hadeed Dr. Cell Phone Home Phone Work Phone 503-789-8990 503-789-8990 Web Site, if applicable **Email Address** kpom@well.com Race and Ethnicity Optional Occupation (present employment) If no relevant experience, None or NA must be entered. Commissioner, Sunrise Water Authority Occupational Background (previous employment) If no relevant experience, None or NA must be entered. Deputy Director, Public Power Council

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Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Reed College		BA	American Studies
University of Chicago		MA	Economics
Educational Background (other) Attach a sep	parate sheet if necessary.		
Prior Governmental Experience (elected or a Commissioner, Sunrise Water Auth		rience, None or NA must be ente	red.
Campaign Finance Information			
A candidate must file a Statement of Organization later than the deadline for filing a nominating pet meet the criteria for an exemption. To meet the cand not expect to spend or receive more than \$7!	ition, declaration of candidacy, or criteria, the candidate must serve	certificate of nomination, whichever as their own treasurer, not have an e	r occurs first, unless they existing candidate committee
If you have an existing candidate committee you includes changes to the election you are active in	must amend the statement of organd the office you are running for	anization not later than 10 days afte :	r a change in information. Th
See the Campaign Finance Manual for the proced	ural and legal requirements of est	ablishing and maintaining a candida	te committee.
Residence Address Exemption			
To exempt your residence address from public dis a Residence Address Exemption MUST include a p	sclosure, complete form <u>SEL 180 –</u> publicly disclosable mailing addres	Residence Address Exemption Requ s. See the Candidates Manual for fur	est. The request for ther information.
I don't want my residence address to be	disclosed. I will be filing a sepa	rate SEL 180 - Residence Address Ex	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 it	s true to the best of my knowledge	2	
Warning Supplying false information on this form (ORS 260.715). A person may only file for filings are invalid. (ORS 249.013 and ORS	one lucrative office at the same e	y with a fine of up to \$125,000 and/o election. Unless the person has witho	or prison for up to 5 years. Irawn from the first filing, al

## Signature Redacted

Candidaté's Signature

Fch 10, 2025
Date Signed