Candidate Filing

District

SEL 190

rev 12/24 ORS 255,235

Candidate Filing February 8, 2025 to March 20, 2025 This filing is an Soriginal Amendment Office Information Filing for Office of: Poard of Directors Position #5 District, Position or County: Head land Fire District #79 Filing Information Filing for Office of: Poard of Directors Position #5 District, Position or County: Head land Fire District #79 Filing Information Gandidate Information Name of Candidate First Cliff MI Last Fortune Candidate Residence/Route Address Street Address For Position Candidate Mailing Address and Contact Information Street Address or Po Box P.O.Bax 756 Welches OR 9706 Work Phone Home Phone 971.533.3167 Email Address City Ostate Policable Cell Phone 971.533.3167 Race and Ethnicity Optional White Occupation (present employment) If no relevant experience, None or NA must be entered. Food & Beverage production.	2025 District Election Filing Dates	ounty elections official. All	information must be completed or t	ne form win be reje	H KIEL
This filing is an Office Information Filing for Office of: Board of Directors Position #5 District, Position or County: Hood land Fire District #74 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First Cliff MI Last Fortune Candidate Residence/Route Address Street Address Street Address or PO Box POBOX POBOX POBOX POSON Work Phone Home Phone 971.533.3167 Fall phone 971.533.3167 Frail Address Cell Phone 971.533.3167 Race and Ethnicity Optional White Occupational Background (previous employment) If no relevant experience, None or NA must be entered.		to March 20, 2025	Withdrawal Date March 20, 20	025	
Office Information Filing for Office of: Board of Directors Position #5 District, Position or County: Hoodland Fire District #74 Filing Information Filing with the required \$10.00 fee Prospective Petition Candidate Information Name of Candidate First Cliff How you would like your name to appear on the ballot Cliff Fortune Candidate Residence/Route Address Street Address Zip 706 Candidate Mailing Address and Contact Information Street Address or PO Box P.O.Box 756 Welches OR 9706 Work Phone Home Phone 971.533.3167 Fimall Address Clifffortune@gmail.com Race and Ethnicity Optional White Occupational Background (previous employment) If no relevant experience, None or NA must be entered.					
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	Retired				
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CLACKAMAS COUNTY ELECTIONS 2025 MAR 12 AM11:55:40

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Educational Background (schools attended) If no	relevant experience, Nor	ne or NA must be entered.	
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Sam Baslow H.S.	12	H.S. Diploma	
Mt. Hood Comm Col.	14	Associn Food Suis	exc-e
Mt. Hood Comm. College	14	Associates	Food Science
National Fire Academy		Certificate	Leader ship +
Educational Background (other) Attach a separate	sheet if necessary.		Administrati
Prior Governmental Experience (elected or appo	inted) If no relevant expe	rience, None or NA must be ente	red.
Hoodland Fire Volunt	wer Firefig	hter 1989.1	997
Hoodland Fire Volunt Hoodland Fire Board	l of Direct	tors 1997-6	present
Comparing Firms Information			
Campaign Finance Information			
A candidate must file a Statement of Organization not I 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 dur	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 a includes changes to the election you are active in and t	amend the statement of orga	anization not later than 10 days after	
See the Campaign Finance Manual for the procedural a	nd legal requirements of esta	ablishing and maintaining a candidat	e 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 disclosured.	disclosable mailing address.	See the Candidates Manual for furth	er information.
	sed. I will be littig a sepa	ace SEC 100 - 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 is true	to the best of my knowledge		
Warning Supplying false information on this form may re	acult in conviction of a follow	with a fine of up to \$135,000 and/o	Series for up to E 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

Signature Redacted

filings are invalid. (ORS 249.013 and ORS 249.170)

3/12/25

Candidate's Signature

Date Signed