Candidate Filing

SEL 190 rev 02/25

| DISTRICT | | | | | ORS 25! |
|--|--|---|---------------------|--|--|
| 1 This form must be filed with co | ounty elections official. All | information must be | completed or the fo | orm will be re | jected. |
| 2025 District Election Filing Dates | | | | | |
| Candidate Filing February 8, 2025 to | Withdrawal Da | te March 20, 2025 | | | |
| This filing is an | Original | | Amendm | ent | |
| Office Information | | | | | |
| Filing for Office of: School Board | 1 Representative | , Canby | | | ····· |
| District, Position or County: Position | on 4 | | | | |
| Filing Information | | | | | |
| Filing with the required \$10.00 fe | ee | | | ······································ | |
| Prospective Petition | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Candidate Information | | | | | |
| Name of Candidate | | | | ······································ | |
| First | MI | | Last | | |
| Carmen | С | | Goetschius | 3 | |
| How you would like your name to a | ppear on the ballot | | | | |
| Carmen Goetschius | The state of the s | www.edu.do.do.do.do.do.do.do.do.do.do.do.do.do. | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | | | | and the same of th | |
| Candidate Residence/Route Addres | S | City | | Ctata | Zin |
| Street Address | | City | | State OR | Zip 97013 |
| 1111 N. Ponderosa Street | | Canby | | | 97013 |
| Candidate Mailing Address and Con | tact Information Do not us | | been exempt from | | mar . |
| Street Address or PO Box | | City | | State | Zip |
| 1111 N. Ponderosa Street | | Canby | | OR | 97013 |
| Work Phone | Home Phone | | Cell Phone | | |
| 503-228-7331 | 360-798-5693 | (| 360-798-5 | 693 | |
| Email Address | Section 1 and 1 an | Web Site, if app | olicable | | |
| carmen.goetschius@gmail.c | om | | | | |
| Race and Ethnicity Optional | | | | | |
| white | | *************************************** | | | |
| | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | | a ya angana mataha ana angana ang | ************************************** |
| Occupation (present employment) | | | ntered. | <u> </u> | - Open |
| Presbyterian Minister, First F | Presbyterian Portland | d . | | | |
| | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | | | | |
| Occupational Background (previous | employment) If no releva | nt experience, None | or NA must be enter | ed. | |

CLACKAMAS COUNTY ELECTIONS 2025 MAR 18 AM 10:57:57

| Educational Background (schools attended) If no | o relevant experience, Non | | | | | |
|--|--|--|--|--|--|--|
| Complete name of School | Last Grade completed | Diploma/Degree/Certificate | Course of Study | | | |
| University of Washington, Seattle | | Bachelor of Arts | Political Science and | | | |
| Princeton Theological Seminary | | Master of Divinity | Theology, Biblical St | | | |
| | | | | | | |
| | | | | | | |
| Educational Background (other) Attach a separat | te sheet if necessary. | | | | | |
| | | | | | | |
| | | | | | | |
| Prior Governmental Experience (elected or app | ointed) If no relevant exper | rience, None or NA must be ente | ered. | | | |
| NA | | | | | | |
| IVA | | | | | | |
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| | and the second s | | | | | |
| 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 \$1,500 | n, declaration of candidacy, or ria, the candidate must serve a | certificate of nomination, whicheve is their own treasurer, not have an | r occurs first, unless they existing candidate committee, | | | |
| If you have an existing candidate committee you must includes changes to the election you are active in and | t amend the statement of orga | nization not later than 10 days afte | | | | |
| 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 disclos a Residence Address Exemption MUST include a public | sure, complete form SEL 180— icly disclosable mailing addres | Residence Address Exemption Requ s. See the Candidates Manual for fu | uest. The request for rther information. | | | |
| I don't want my residence address to be disc | losed. I will be filing a sepa | rate SEL 180 – Residence Address E | 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 tru | e to the best of my knowledge | 3 | | | | |
| Warning Supplying false information on this form may (ORS 260.715). A person may only file for one | result in conviction of a felon lucrative office at the same e | y with a fine of up to \$125,000 and/ lection. Unless the person has with | or prison for up to 5 years. drawn from the first filing, all | | | |

filings are invalid. (ORS 249.013 and ORS 249.170)

Signature Redacted

March 18, 2025
Date Signed

Candidate's Signature