Candidate Filing

District

CLACKAMAS COUNTY ELECTIONS 2025 FEB 10 AN11:24:35 EL 190 rev 12/24 ORS 255,235

1 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 M	larch 20, 2025				
This filing is an	Original			Amendment				
Office Information								
Filing for Office of: School	Board D	irector						
District, Position or County: POS	ition #5	Westl	inn-Wilsonv	ille Schoo	1 Distri	ct		
Filing Information			——— ,					
Filling with the required \$10.00 f	ee							
Prospective Petition								
Candidate Information								
Name of Candidate				1				
First Kelly	MI	A		Last SLOC	ρp			
How you would like your name to a	appear on the bal	lot						
Kelly Sloop								
Candidate Residence/Route Addres	ss							
Street Address 20565 Fernvieu	N Ra.		Westlinn		State	97068		
Candidate Mailing Address and Contact Information								
Street Address or PO Box			City		State	Zip		
Work Phone N/A	Home I	Phone 3-65	1-4641	Cell Phone 503-7	08-531	8		
Email Address MKSloop@gmail. Com								
Race and Ethnicity Optional								
Occupation (present employment) If no relevant experience, None or NA must be entered.								
Registered Phurmaci	st							
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.								
Registered Pharmac								

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Educational Background (schools attended) If		Diploma/Degree/Certificate	Course of Study
Complete name of School	Last Grade completed		
Oregon State University	16+	B.S. Pharmacy	Pharmacy
		-	<u> </u>
Educational Background (other) Attach a separ	rate sheet if necessary.		
Prior Governmental Experience (elected or ap	pointed) If no relevant expe	erience, None or NA must be ente	ered.
West Linn-wilsonville Sch	roof Board Direc	tor Position 5 20	121-2025
7,000	•		
Campaign Finance Information			
A candidate must file a Statement of Organization r later than the deadline for filing a nominating petiti	not later than three business da	ys of first receiving a contribution or	making an expenditure and no
meet the criteria for an exemption. To meet the cri	teria, the candidate must serve	as their own treasurer, not have an	existing candidate committee,
and not expect to spend or receive more than \$750	during the entire calendar year	(including in-kind contributions and	personal funds).
If you have an existing candidate committee you m			
includes changes to the election you are active in a	nd the office you are running fo	r.	
See the Campaign Finance Manual for the procedur	ral and legal requirements of est	tablishing and maintaining a candida	te committee.
Residence Address Exemption			
To exempt your residence address from public disc	leave complete form CEL 100	Posidonce Address Evenntion Regu	lest. The request for
a Residence Address Exemption MUST include a pu	blicky disclosable mailing address	ss. See the Candidates Manual for fu	rther information.
I don't want my residence address to be di			
I don't want my residence address to be di	sciosed. I will be filling a sepa	Tate SEL 100 Residence Address L	
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 t	true to the best of my knowledg	ge	
Warning			
Supplying false information on this form m	ay result in conviction of a felor	ny 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 o	ne lucrative office at the same	election. Unless the person has with	drawn from the first filing, all

(ORS 260.715). A person may only file for one lucra filings are invalid. (ORS 249.013 and ORS 249.170)

2-10-25

Candidate's Signature **Date Signed**