## **Candidate Filing**

District

CLACKAMAS COUNTY ELECTIONS 2021 FEB 11 AH10:29:05FL 190

rev 01/21 ORS 255.235

| Candidate Filing February 6, 2021 to March 18, 2021 |                 | Withdrawal Date March 18, 2021          |           |                      |
|---|-----------------|---|-----------|----------------------|
|   | Driginal        | Amendi                                  | Amendment |                      |
| Office Information                                  |                 |   |           |                      |
| Filing for Office of: Position 4                    |                 |   |           |                      |
| District, Position or County: Lake Gr               | Me W            | ster District                           |           |                      |
| Filing Information                                  |                 |   |           |                      |
| Filing with the required \$10.00 fee                |                 |   |           |                      |
| Prospective Petition                                |                 |   |           |                      |
| Candidate Information                               |                 |   |           |                      |
| Name of Candidate                                   |                 |   |           |                      |
| Daniel Last Lowe                                    |                 | Suffix                                  |           |                      |
| How you would like your name to appear on the       | ballot          |   |           | A Dien et            |
| Daniel Lowe   |                 |   |           |                      |
| Candidate Residence/Route Address                   |                 |   |           |                      |
| Street Address<br>5725 Wmdfield D                   | tive            | City Lake Oswego                        | State     | <sup>Zip</sup> 9703. |
| Candidate Mailing Address and Contact Informat      |                 |   | required. | TO FIGURE 1119       |
| Street Address or PO Box                            |                 | City                                    | State     | Zip                  |
| Work Phone 571499-3088 Home Phone                   |                 | Cell Phone 571 - 499 - 3088 Fax         |           |                      |
| Email Address OWE 47 C MSn.C                        | om              | Web Site, if applicable                 |           |                      |
|   | ni e i sen      |   |           |                      |
| Race and Ethnicity Optional                         |                 |   |           |                      |
|   |                 |   |           |                      |
| Occupation (present employment) If no relevant      | experience, N   | one or NA must be entered.              |           |                      |
| Retired   |                 |   |           |                      |
|   |                 |   |           |                      |
|   | 20 Yes - 22 A   |   |           |                      |
| Occupational Background (previous employment        | ) If no relevar | nt experience, Nane or NA must be enter | red.      |                      |
| Physician, Surgeon                                  |                 |   |           |                      |
| 0 100/3100011 10.4 900.1                            |                 |   |           |                      |

CLACKAMAS COUNTY ELECTIONS 2021 FFR 11 ANTO:29:05

|  |                          |                            | T. LUISTA . TEL. O.C. |
|--|--------------------------|----------------------------|-----------------------|
| Educational Background (schools attended) If no  | relevant experience, Non | e or NA must be entered.   |                       |
| Complete name of School (no acronyms)            | Last Grade completed     | Diploma/Degree/Certificate | Course of Study,      |
| university oregon.                               |                          | BA                         | General Science       |
| Orean Hearth Povences Univerting                 |                          | MD                         | Mediano               |
| Dream Hearth Sciences Univerty                   |                          | 20%                        | Strategy              |
|  |                          |                            | 0-7                   |
| Educational Background (other) Attach a separate | sheet if necessary.      | W                          |                       |
|  |                          |                            |                       |

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

City Counder, Beker City, OR Command Combat Support Hospital Development of mylementate Onegan Frama System

## Campaign Finance Information (not applicable to candidates for federal office)

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, 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 must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

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. (ORS 249.013 and ORS 249.170)

## ignature Redacted

Candidate's Signature

6 February 2021
Date Signed