State Voters' Pamphlet

Candidate Filing

Filing Dates

Major Political Party or Nonpartisan

Candidate Filing

SEL 101

Candidate Withdrawal

rev 09/15 ORS 249.031

Primary Election May 17, 2016		Filed electronically using Of					
First Day to File	September 10, 2015	January 18, 2016		March 11 2016			
Last Day to File	March 08, 2016	March 10, 2016		March 11, 2016			
General Election November 8, 2016 First Day to File	June 1, 2016	July 11, 2016					
Last Day to File	August 30, 2016	August 30, 2016		September 2, 2016			
All Information must be completed	or the form will be rejected	d.					
This filing is an	Original	☐ Amendment					
Filing Officer							
☐ Secretary of State	County Elections Official City Recorder (Auditor)						
Office Information							
Filing for Office of: Clackamas Cou	nty Commissioner						
District, Position or County: Position 3							
Party Affiliation: Democratic Part	ty Republican Party	☐ Independent Party	■ Nonp	partisan			
Incumbent Judge: Ye	Yes O Nondisclosure on file						
Paying by Declaration or Petition:							
Declaration, with the required fee							
Office F	iling Fee Office		Filing	Fee			
	/a District Attorney \$50						
	n/a County Judge \$50 \$150 MSD Executive Officer, MAD Director \$100						
•	1100 MSD Councilor \$25						
	100 County Office \$50						
	City Office Set by charter or ordinance Justice of the Peace n/a						
Prospective Petition	Petition circulators will be paid Yes No						
Candidate Information							
Name of Candidate	0)						
First	MI Last			Suffix Title			
Martha	N Schrade	er					
How you would like your name to appe	ar on the ballot						
Martha Schrader							
Candidate Residence/Route Address							
Street Address	City	State	Zip	County			
147 5th Street	Lake Oswego	OR 97034 Clackam		Clackamas			
Candidate Mailing Address							
Street Address or PO Box	City	State	Zip				
147 5th Street	Lake Oswego	OR	97034				

2015 SEP 17 PM01:59:45

Contact Information: On	ly one phone number is	s required.	,				
Work Phone	ne Home Phone		Cell Pho	ne	Fax	Fax	
503) 655-8581	(503) 407-6	257					
Email Address			Web Site	e, if applicable			
Info@Commissionermarthaschrader.com			www.CommissionerMarthaSchrader.com				
Occupation (present em		vant experience	e, None o	r NA must be en	tered.		
Clackamas County Co	ommissioner						
Occupational Backgrou		yment) If no re	levant exp	perience, None o	or NA must b	e entered.	
Clackamas County Co							
Oregon State Senator Small Business Owne	<u></u>						
Small Business Owne Farmer	ar i						
Educational Backgroun						red. Course of Study	
Complete name of School (r Cornell University	no acronyms)	Last Grade com Graduate	ed	Diploma/Degree/0 Bachelor of	Science	Ag & Life Science	
University of Illinois		Graduate		Masters D	egree	Entomology	
Portland State Univers	sity	Graduate		Masters L	egree	Education	
Educational Background (otl	her) Attach a separate s	sheet if necessar	y.			*:	
Prior Governmental Exp	perience (elected or	appointed) If r	o relevar	nt experience, No	one or NA m	ust be entered.	
Clackamas County Co							
Oregon State Senator							
	700 77						
Campaign Finance Infor	mation (not applica	ble to candida	tes for fe	ederal office)			
Candidate Committee							
Yes, I have a candidate of No, I do not expect to spe		receive more tha	n \$750 du	ring each calendar	vear Lunder	stand I must still keen	
records of all campaign tr	ransactions and if total	contributions or to	otal expend	ditures exceed \$7	50 during a ca	lendar year, I must follow	
the requirements detailed				(CEL 220)			
☐ No, but will be filing a Sta	itement of Organization	for Candidate Ci	ommittee (SEL 220).			
signing this document, I her	-						
 → I will accept the nomina → I will qualify for said off → all information provided → no circulators will be contained 	fice if elected	true to the best o	f my know natures ob	ledge <i>and</i> otained by the circ	ulator on a pro	espective petition	
For Major Political Party (ALVANOR CHOOSE MICHAEL CHOOSE CONTRACTOR	·			,		
→ if not nominated, I will I → I have been a member	not accept the nominati	subject to the exc	eptions sta	ated in ORS 249.0	46, for at leas	named t 180 days before candidates filing for the	

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 or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first filing, all filings are invalid.(ORS 249.013 and ORS 249.170)

Signature Redacted

Date Signed

Candidate's Signature
Office Use Only: Initials_

Batch Sheet/CC Approval Code/Receipt Number

18 0365