See Instructions and Filing Fees attached ORS 251.335 CCE-36 (Rev. 1/13) **CLACKAMAS COUNTY** CANDIDATE'S STATEMENT FOR COUNTY VOTERS' PAMPHLET Original Statement ELECTION DATE: May 20, 2014 □ Amended Statement E-Mail Party affiliation or Non-Partisan Office Name of Candidate (as it will appear on bailot) non-partisan reelectcartottacollette@comcast.net Carlotta Collette Telephone (work) Fax Number Telephone (home) NΑ 503-797-1887 503-653-5771 Filing for the Office of (include District, Position or Zone Number, if applicable) Metro Councilor, District 2 This information furnished by (Name of Candidate or Committee as it should appear in voters' pamphlet) Carlotta Collette Attached is the statement for the candidate listed above; included is the candidate's: Required information (see Page 2) ☑ Occupation (whether paid or unpaid), or the word "None" Occupational Background ☑ Educational Background, or the word "None" ☑ Prior Governmental Experience ☑ Optional Information (see Page 3) Photograph NOTE: Language which violates any provision of ORS 251.415 will be excluded from the voters' pamphlet. By signing this document, I hereby state: That all information provided by me on this form (CCE-36) including my occupation, educational and occupational background and prior governmental experience, is true to the best of my knowledge; I am the author of this statement (ORS 251.415); I have read and understand the instructions for submitting this candidate statement; and The photograph I have provided, if any, is less than four (4) years old. Signature of Candidate or agent on behalf of Candidate Phone Number of Agent (if applicable) WARNING: Supplying false information on this form may result in conviction of a felony with a fine of up to \$100,000 and/or imprisonment for up to five years. (ORS 260.715). FOR OFFICE USE ONLY Photograph: Dne Statements of Endorsement: Staff Initials Cash or Check Number 5382 Yes# □ Not Submitted Receipt Number <u>18</u>0002 Name of Candidate □ No

Word / Number Count Total

on back of photo

NAME OF CANDIDATE: Carlotta Collette			
(Maximum 325 hand-counted words/numbers	EQUIRED INFORM for Required & Option atter of public record		ings already printed.) duced.
Occupation (Present Employment – Paid or Unp	aid)		
Metro Councilor	•		
			•
Occupational Background (Previous Employme	ent – Paid or Unpaid	d)	
Collette Communications (1999-2007) Northwest Power Planning Council (1984-1998) Rain Magazine (1979-1983)	·	•	
·			
	-		
Educational Background (schools attended - us	se attachment if nee	eded)	
Complete name of school – <u>no acronyms</u>	Last grade level completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc.)	Course of study (optional)
Marylhurst University		BA	
			, , , , ,
Prior Governmental Experience (Elected or Ap	<u>l</u> pointed)		
Milwaukie City Council Clackamas Community College Board of Educat Clackamas County Business Alliance Board Clackamas County Coordinating Committee Co- Joint Policy Advisory Committee on Transportati	tion Chair		

NAME OF CANDIDATE: Carlotta Collette

OPTIONAL INFORMATION

(Maximum 325 hand-counted words/numbers for Required & Optional Information excluding headings already printed.)

Note: This information is a matter of public record and may be published or reproduced.

I have been a member of the Metro Council since 2007, serving the cities and neighborhoods of urban Clackamas County and a portion of Southwest Portland. I have worked to bring people across our region, and especially in my district, together to solve major problems and take advantage of big opportunities. I'm committed to revitalizing and maintaining our communities, improving our transportation system, continuing to purchase and restore important natural areas, and through actions like these, create jobs in our region.

In seeking endorsements for my re-election, I looked to people I work with, people I work for, and people and groups I admire and whose respect I am honored to have. I wanted especially the endorsements of the mayors of the cities in my district, and they came through. I've listed key endorsements below, but the full list is available at my web site: www.carlottacollette.com

West Linn Mayor John Kovash

ORS 251.405

CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT

SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette, Metro Council, District 2 NAME OF CANDIDATE Measure Argument: MEASURE NUMBER Governor Barbara Roberts consent to the use of my name, or the name of the organization I am authorized to represent, (printed name) exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. Governor Barbara Roberts Signature Redacted Mar. 1, 2014 Date Signed Signature of Individual

ORS 251.405

CLACKAMAS COUNTY

STATEMENT OF ENDORSEMENT SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette, Metro Council, District 2 NAME OF CANDIDATE MEASURE NUMBER ☐ Measure Argument:_____ Carolyn Tomei consent to the use of my name, or the name of the organization I am authorized to represent, (printed name) exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. Representative Carolyn Tomei Signature Redacted Signature of Individual

CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT

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SEE INSTR	RUCTIONS ON BACK
lection Date:	
Statement of Endorsement for:	
✓ Carlotta Collette	NAME OF CANDIDATE
	
Measure Argument:	MEASURE NUMBER
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I,(printed name)	, consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below.
In this box, type or print the name and title (if	the organization I am authorized to represent, exactly as it appears in the box below. used) of person and/or organization person is authorized to 'pamphlet statement or argument. An organization's name ng the argument or statement. The person's title must also be
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In this box, type or print the name and title (if represent exactly as it will appear in the voters should be used only if the organization is endorsir listed if it is to appear in the voters' pamphlet state. NW Oregon Labor Council	the organization I am authorized to represent, exactly as it appears in the box below. used) of person and/or organization person is authorized to 'pamphlet statement or argument. An organization's name ng the argument or statement. The person's title must also be
In this box, type or print the name and title (if represent exactly as it will appear in the voters should be used only if the organization is endorsing listed if it is to appear in the voters' pamphlet state.	the organization I am authorized to represent, exactly as it appears in the box below. used) of person and/or organization person is authorized to 'pamphlet statement or argument. An organization's name ng the argument or statement. The person's title must also be

CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT

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SEE INSTRUC	CTIONS ON BACK	
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Statement of Endorsement for:	•	
☑ Candidate's Statement:		
NAME OF CANDIDATE		
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Measure Argument: MEASURE NUMBER		
Andy Maggi	and the the use of my name or the name of	
(printed name)	, consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below.	
represent exactly as it will appear in the voters' pa	ed) of person and/or organization person is authorized to amphlet statement or argument. An organization's name the argument or statement. The person's title must also be ent / argument.	
Oregon League of Conservation Voters		
Signature Redacted	Date Signed	

ORS 251.405

CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT

SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette Candidate's Statement: NAME OF CANDIDATE Measure Argument:_____ MEASURE NUMBER Matt Tracy consent to the use of my name, or the name of the organization I am authorized to represent, (printed name) exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. AFSCME Local 3580 and 3580-1 Signature Redacted NOTE: Submitting a false signature on this statement is a violation of ORS 251.405.

CLACKAMAS COUNTY
STATEMENT OF ENDORSEMENT

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SEE INSTRUCTIONS ON BACK

5/20/2014 Election Date:	
Statement of Endorsement for:	
Carlotta Collette Candidate's Statement:	
Sandidate 3 Statement	NAME OF CANDIDATE
☐ Measure Argument:	
Measure Argument.	MEASURE NUMBER
, Justin Wood	, consent to the use of my name, or the name of
(printed name)	the organization I am authorized to represent, exactly as it appears in the box below.
represent exactly as it will appear in the vote	if used) of person and/or organization person is authorized to ers' pamphlet statement or argument. An organization's name rsing the argument or statement. The person's title must also be atement / argument.
Oregonians for Affordable Housing	
Signature Reda	Cted 3/3/2017 Date Signed
Signature of individual	

CLACKAMAS COUNTY

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STATEMENT OF ENDORSEMENT		
SEE INSTRUCTION	NS ON BACK	
Election Date:	·	
Statement of Endorsement for:		
Carlotta Collette, Metro Counc	cil, District 2	
NAME OF CANDIDATE		
Measure Argument:		
Kent Studebaker (printed name)	, consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below.	
In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument.		
Lake Oswego Mayor Kent Studebaker		

Signature Redacted

Sign

Signature of Individual

ORS 251,405

CLACKAMAS COUNTY

STATEMENT OF ENDORSEMENT SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette, Metro Council, District 2 NAME OF CANDIDATE Measure Argument: MEASURE NUMBER , consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. Gladstone Mayor Wade Byers Signature Redacted

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CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT

STATEMENT OF ENDORSEMENT	
SEE INSTRI	UCTIONS ON BACK
Election Date:	
Statement of Endorsement for:	
Carlotta Collette, Metro Candidate's Statement:	Council, District 2
NAME OF CANDIDATE	
Measure Argument:	·
MEASURE NUMBER	
, Jeremy Ferguson (printed name)	, consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below.
annear to worth, as it will annear in the voters'	ng the argument or statement. The person's title must also be
Milwaukie Mayor Jeremy Ferguson	
Signature Redacted	1 27, 204 Date Signed

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STATEMENT OF ENDORSEMENT		
SEE INSTRUCT	TIONS ON BACK	
Election Date:		
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Statement of Endorsement for:	,	
Carlotta Collette, Metro Co	uncil, District 2	
Candidate's Statement.	NAME OF CANDIDATE	
☐ Measure Argument:		
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Portland Mayor Charlie Hales Signature Redacted	2·27·/4 Date Signed	

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SEE INSTRU	ICTIONS ON BACK
Election Date:May 20, 2014	
Statement of Endorsement for:	
Carlotta Collette, Metro	Council, District 2
Candidate's Statement.	NAME OF CANDIDATE
☐ Measure Argument:	
Measure Argument	MEASURE NUMBER
Lori DeRemer (printed name)	, consent to the use of my name, or the name of the organization I am authorized to represent, exactly as it appears in the box below.
represent exactly as it will appear in the voters'	sed) of person and/or organization person is authorized to pamphlet statement or argument. An organization's name g the argument or statement. The person's title must also be ment / argument.
Happy Valley Mayor Lori DeRemer	
Signature Redacted	Date Signed

CLACKAMAS COUNTY

ORS 251.405

	STATEMENT OF E	NDORSEMENT
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Election Date:May 20, 2	2014	
Statement of Endorsemen	at for:	
Carlotta Collette, Metro Cour		cil, District 2
Canada Canada	,	NAME OF CANDIDATE
☐ Measure Argument:		ACT A CURE AND MEDICAL CONTRACTOR OF THE CONTRAC
		MEASURE NUMBER
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Doug Neeley		, consent to the use of my name, or the name of
1	(printed name)	the organization I am authorized to represent, exactly as it appears in the box below.

In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument.

Oregon City Mayor Doug Neeley

Signature Redacted

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CLACKAMAS COUNTY

STATEMENT OF ENDORSEMENT SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette, Metro Council, District 2 NAME OF CANDIDATE ☐ Measure Argument: MEASURE NUMBER Heather Kibbey consent to the use of my name, or the name of the organization I am authorized to represent, (printed name) exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. Rivergrove Mayor Heather Kibbey Signature Redacted Mark 7, 2014 Date Signed

ORS 251,405

CLACKAMAS COUNTY STATEMENT OF ENDORSEMENT SEE INSTRUCTIONS ON BACK May 20, 2014 Election Date: Statement of Endorsement for: Carlotta Collette, Metro Council, District 2 Candidate's Statement: NAME OF CANDIDATE Measure Argument: MEASURE NUMBER John Kovash consent to the use of my name, or the name of the organization I am authorized to represent, (printed name) exactly as it appears in the box below. In this box, type or print the name and title (if used) of person and/or organization person is authorized to represent exactly as it will appear in the voters' pamphlet statement or argument. An organization's name should be used only if the organization is endorsing the argument or statement. The person's title must also be listed if it is to appear in the voters' pamphlet statement / argument. West Linn Mayor John Kovash Signature Redacted