

# City of Johnson City

August 25, 2022

Sherry Hall Clackamas County Clerk 1710 Red Soils Court, Suite 100 Oregon City, OR 97045

Dear Ms. Hall:

This letter is to certify the City of Johnson City's general election candidates. Please place the following names on the November 2022 general election ballot for the office of city councilor for the City of Johnson City:

Randy P. Anderson Margaret P. McCrea Tara Schoffstall Rex Trullinger

At the biennial general election, three councilors shall be elected. The two receiving the highest number of votes shall hold office for four years, the next highest vote will hold a two-year term.

Sincerely,

# Signature Redacted

Judy Davis City Recorder

**SEL 101** 

Major Political Party or Nonpartisan

rev 04/22 ORS 249<u>.</u>031

Filing Dates	- 60		Candidate	Filing	Candidate Wi	ithdrawal
Primary Election	First Day to File		September	9. 2021		
May 17, 2022	Last Day to File		March 8, 20		March 11, 2022	2
General Election	First Day to File		June 1, 2022	2		
November 8, 2022	Last Day to File		August 30, 2	2022	September 2, 2	2022
Filing Information						
This filing is an	Original		Amendr	nent		
Office Information						
Filing for Office of:	UNSELOR					
District, Position or County:	JOHNSON	MY				
Party Affiliation:		Democratic P	arty	Republican Par	ty Non	partisan
Incumbent Judge (for judicial	candidates only):	Yes		☐ No	☐ Non	disclosure on file
Filing Method						
Fee						
Office	Filing Fee		Office		Filing Fee	
United States President	n/a .		District Attorr	ney	\$50	47
United States Vice President	n/a		County Judge		\$50	
United States Senator	\$150		MSD Executiv	e Officer, MAD Director		
United States Representative	\$100		MSD Councilo		\$25	
Statewide Offices	\$100		County Office		\$50	
State senator or Representative	\$25		City Office		Set by charter	or ordinance
Circuit Court Judge	\$50		Justice of the	Peace	n/a	
Prospective Petition, in lie	eu of filing fee		Some circula	itors may be paid	Yes	☐ No
Candidate Information			12, 1	MI 1-10 I = 1		
Name of Candidate						
First RANDY	M	Last	ER801	V	Suffix	
How you would like your nar	me to appear on the ba	llot				
SAME						
Candidate Residence / Route	Address					
Street Address	WW	City		State	Zip	County
17010 SE	804 PLACE	TOHNS	ON CITY	OR	97267	CLACK
Candidate Mailing Address a	nd Contact Information	Only one phone	e number and a	n email is required.		
Street Address or PO Box	(6)	City		State	Zip	
SAME	100	1 7				
Work Phone	Home Phone		Cell Phone		Fax	
For all Address			W-1-61-16			
Email Address		ı	Web Site, if	аррисаріе		œ.
Race and Ethnicity Optiona	 					

Occupation (present employment) If not employed, enter "Not Employed".
NOT EMPLOYED
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
Educational Background (schools attended)
Complete name of School  Last Grade completed Diploma/Degree/Certificate Course of Study  SEVERAL
.50
Educational Background (other) Attach a separate sheet if necessary.
Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.
CURRENT COUNSEL.
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.
Candidate Attestation
By signing this document, I hereby state that:  → I will accept the nomination for the office indicated above;  → I will qualify for said office if elected;  → All information provided by me on this form is true to the best of my knowledge; and  → No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition  For Major Political Party Candidates
<ul> <li>→ if not nominated, I will not accept the nomination or endorsement of any political party other than the one named</li> <li>→ I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.</li> </ul>
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)
Candidate Signature 2/19/22  Date

**SEL 101** 

#### Major Political Party or Nonpartisan

rev 04/22 ORS 249.031

Filing Dates			Candidate	Filing	Candidate W	ithdrawal .
Primary Election May 17, 2022	First Day to File Last Day to File		September March 8, 2	9, 2021	March 11, 202	
General Election November 8, 2022	First Day to File Last Day to File		June 1, 202 August 30,		September 2, 2	2022
Filing Information				11.0	STATE AND A STATE OF	
This filing is an	Original		Amend	ment		
Office Information	1	1 7 5		At A control	. AEL "13	
Filing for Office of: Cite	1 Council	012				-
District, Position or County:	Johnson	Citer				
Party Affiliation:		Democratic P	arty	Republican Part	ty Non	partisan .
Incumbent Judge (for judicial ca	indidates only):	] Yes	m.m	Y WHOTE	☐ Non	disclosure on file
Filing Method					1 1 5	
Fee	The second					
Office United States President United States Vice President United States Senator United States Representative Statewide Offices State senator or Representative Circuit Court Judge	Filing Fee n/a n/a \$150 \$100 \$100 \$25 \$50		Office District Attor County Judge MSD Executi MSD Council County Office City Office Justice of the	e ve Officer, MAD Director or e	\$50 \$50 \$100 \$25 \$50 Set by charter	or ordinance
Prospective Petition, in lieu	of filing fee		Some circul	ators may be paid	Yes	No
Candidate Information	75 F	at 1 Com	11-1-1-1	- 150 miles		
Name of Candidate						
First	МІ	Last			Suffix	ş-
Margaret	P	M=	-rea			
How you would like your name	to appear on the bal					
Some						363
Candidate Residence / Route A	ddress					
Street Address		City		State	Zip	County
8250 SE P	Doy st.	Johnson	~ City	OR	97867	Clack.
Candidate Mailing Address and	Contact Information	Only one phone	e number and	an email is required.		
Street Address or PO Box		City		State	Zip	
Sane						t.
Work Phone	Home Phone	-	Cell Phone		Fax	
Email Address			Web Site, if	applicable		
Race and Ethnicity Optional						
Caucasian						in to

Occupation (present employment) If not employed, enter "Not Employed".
Retired Geography Instructor
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
Educational Background (schools attended)
Complete name of School  Last Grade completed Diploma/Degree/Certificate Course of Study  Portland State University Masters Described
TOT TRUTE O POLE CITY LEGIS TO THE LEGIS TO
Educational Background (other) Attach a separate sheet if necessary.
Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.
2 yrs. on Johnson City Correct.
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).
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Margar & P. M. Coca Laby 19, 2022 Candidate Signature  Candidate Signature

Major Political Party or Nonpartisan

rev 04/22 ORS 249.031

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General Election	First Day to File	June 1, 2022	
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Filing Information			
This filing is an	Original	Amendment	
Office Information	y a		
Filing for Office of: Joh	nson City Cit	ry Council	
District, Position or County:	Clackamas	9	
Party Affiliation:	Democrat	ic Party Republican Part	y Nonpartisan
Incumbent Judge (for judicial ca	andidates only): Yes	□ No	Nondisclosure on file
Filing Method			
Fee \$10			
Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Vice Freshalm	\$150	MSD Executive Officer, MAD Director	\$100
	\$100	MSD Councilor	\$25
United States Representative	-	County Office	\$50
Statewide Offices '	\$100		Set by charter or ordinance
State senator or Representative	\$25	City Office	
Circuit Court Judge	\$50	Justice of the Peace	n/a
Prospective Petition, in lieu	of filing fee	Some circulators may be paid	Yes No
Candidate Information		1 2 2 2 P 1 2 P	
Name of Candidate			
First	MI Last		Suffix
		choffstall	
Tara	L )	100	
How you would like your name	e to appear on the ballot	A CONTRACTOR OF THE CONTRACTOR	
How you would like your name Tara Schof	e to appear on the ballot		
How you would like your name	e to appear on the ballot		
How you would like your name Tara Schof	e to appear on the ballot	State	Zip County
Tara Schof Candidate Residence / Route A Street Address	e to appear on the ballot  (Stall Address City Place John	ison City Oil	zip   County G7267 Clackan
Tara Schof Candidate Residence / Route A Street Address	Address City Contact Information Only one p	2	97267 Clackan
Tara Schof Candidate Residence / Route A Street Address	e to appear on the ballot  (Stall Address City Place John	ison City Oil	
Tara Schof Candidate Residence / Route A Street Address Lolo 20 SE 80 h Candidate Mailing Address and	Address City Contact Information Only one p	son City Oil Shone number and an email is required.  State	97267 Clackan
Candidate Residence / Route / Street Address  Candidate Mailing Address and Street Address or PO Box	Address City Contact Information Only one p	hone number and an email is required.	97267 Clackan
Candidate Residence / Route A Street Address  Candidate Mailing Address and Street Address or PO Box	Address  City  City  City  City  City  Home Phone	son City OiZ shone number and an email is required.  State  Cell Phone	97267 Clackan
How you would like your name  Toro Schof  Candidate Residence / Route A  Street Address  Candidate Mailing Address and  Street Address or PO Box  N/A	City  Contact Information Only one p  City  Home Phone	Sch Ctt OC Shone number and an email is required.  State  Cell Phone  Web Site, if applicable	97267 Clackan
Candidate Residence / Route / Street Address  Candidate Mailing Address and Street Address or PO Box  Work Phone  Email Address  †Schoffstall	Address  City  City  City  City  City  Home Phone	Sch Ctt OC Shone number and an email is required.  State  Cell Phone  Web Site, if applicable	97267 Clackan
Candidate Residence / Route / Street Address  Candidate Mailing Address and Street Address or PO Box  Work Phone	City  Contact Information Only one p  City  Home Phone	Sch Ctt OC Shone number and an email is required.  State  Cell Phone  Web Site, if applicable	97267 Clackan

Occupation (present employment) If not employed, enter "Not Employed".
Education
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
N/A
Educational Background (schools attended)
Complete name of School Last Grade completed Diploma/Degree/Certificate Course of Study
George Washington University BS Geology
George washington University MEd Secondary Science
Educational Background (other) Attach a separate sheet if necessary.
10/14
Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.
N/A
Campaign Finance Information Not applicable to candidates for federal office.
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For Major Political Party Candidates  → if not nominated, I will not accept the nomination or endorsement of any political party other than the one named  → I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.
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Lua Scho Stull  Gandidate Signature  6/29/2022  Date

Major Political Party or Nonpartisan

rev 04/22 ORS 249.031

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Filing Information			
This filing is an	Original	Amendment	
Office Information			
Filing for Office of: City	Councilor - C	ity of Johnson C	7 ita
District, Position or County:			)
Party Affiliation:	☐ Democration	Party Republican Pa	rty Nonpartisan
Incumbent Judge (for judicial ca	andidates only):	☐ No	Nondisclosure on file
Filing Method	<i>3</i> ′=		100 mm 200 mm
<b>⊠</b> Fee			16
Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Senator	\$150	MSD Executive Officer, MAD Director	or \$100
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Statewide Offices	\$100	County Office	\$50
State senator or Representative	\$25	City Office	Set by charter or ordinance
Circuit Court Judge	\$50	Justice of the Peace	n/a
Prospective Petition, in lieu	of filing fee	Some circulators may be paid	Yes No
Candidate Information			THE LIST HEAT HE DESIGNATION
Name of Candidate			
First	. Ml Last		Suffix
RFX	G TE	RULLINGER	
How you would like your name		OUCCET THE CETE	
REX TRUI	LINGER.		
Candidate Residence / Route A			
Street Address	City	State	Zip County .
16740 SE	SOTH PLACE A	PORT. OR	97267 CLACKAM
		one number and an email is required.	
Street Address or PO Box	City	State	Zip
8			
Work Phone	Home Phone	Cell Phone	Fax
NA	N/A	541-921-3010	N/A
Email Address		Web Site, if applicable	ε (3)
VEX Trulling	EN@ GMAIL, CON	1	
Race and Ethnicity Optional			*
	4		

Occupation (present employment) If not employed, enter "Not Employed".
NOT EMPLOYED
Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
NONE
Educational Background (schools attended)
Complete name of School Last Grade completed Diploma/Degree/Certificate Course of Study
CLEVELAND H.S. 12TH
Educational Background (other) Attach a separate sheet if necessary.
NONE
Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.
NONE - ONLY APPOINTED CURRENT COUNCILOR
Y/S-1
Campaign Finance Information Not applicable to candidates for federal office.
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5. 5
By 6. fullman 7.7.2022
- 12 6. Tullynyn 7. 7. 2022
Candidate Signature Date