

District Candidate Filing

This information is a matter of public record and may be published or reproduced.  Original  Amendment

Candidate Information

Candidate Legal Name\* Willard V. Childers JR. Candidate Name (As it should appear on ballot)\* Junior Childers
Filing for Office of\* Board of directors District and/or position (if applicable)\* Bly Water & Sanitary Pos #2

Residence Address, Street/Route\* Po Box 172 60460 Edsall St.

City\* Bly State\* OR Zip\* 97622 County of Residence\* Klamath

Home Phone Work Phone Cell Phone 541-891-0934 Fax

Email Address\* JuniorChilders@yhd.com Date of Election\* MAY 21, 2013

Mailing Address (where all correspondence will be sent) Street/Route\* Po Box 172

City\* Bly State\* OR Zip\* 97622

\* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee.
Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required) Pastor Faith Assembly OF God

Occupational Background previous employment - paid or unpaid (required) Faith Assembly OF God

Educational Background schools attended, use attachment if needed (required)

Table with 4 columns: Complete Name of School, Last Grade Level Completed, Diploma/Degree/Certificate, Course of Study optional. Rows include Red Bluff High (Grade 12, Diploma) and Global Univ. (Licence of ministry).

Other:

**Required Information** (if no relevant information, list "none" or "n/a")

**Prior Governmental Experience** elected or appointed (required)

None

*By signing this document, I hereby certify that:*

- I will qualify for said office if elected
- All information provided by me on this form, including my occupation, education and occupational background, and prior governmental experience, is true to the best of my knowledge

Check the applicable box (not applicable to candidates for federal office - US Senate and US Representative):

- By marking this box, I certify I do not have an existing candidate committee and I do not expect to spend more than \$750 or receive more than \$750 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the 2012 Campaign Finance Manual.
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*Walter Child*

Candidate's Signature

2-14-13

Date Signed

**For Office Use Only**

*WCH*  
Initials

*CA*

Cash, Check Number, or credit card approval #

*109454*  
Receipt #

This information is a matter of public record and may be published or reproduced.  Original  Amendment

Candidate Information

Candidate Legal Name\* Kelly Fryou Candidate Name (As it should appear on ballot)\* Kelly Fryou

Filing for Office of\* Bly water & Sanitary Director, Position 2 District and/or position (if applicable)\*

Residence Address, Street/Route\* 18575 Henwas Lp. / PO Box 436

City\* Bly State\* OR Zip\* 97622 County of Residence\* Klamath

Home Phone 541-219-2444 Work Phone Cell Phone Fax

Email Address\* woodworkerfryou@yahoo.com Date of Election\* 7/2011 May 21, 2013

Mailing Address (where all correspondence will be sent) Street/Route\* Same as above City\* Bly State\* OR Zip\* 97622

\* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee. Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required) none

Occupational Background previous employment - paid or unpaid (required) Hessel Tractor Co. - paid

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms) Centennial High. Last Grade Level Completed 12 Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc) Diploma Course of Study optional

Other:

Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

~~None~~ Director, position 2 elected 7/1/2011  
Bly Water & Sanitary District

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*Kelly Stryker*  
Candidate's Signature

1-15-13  
Date Signed

For Office Use Only  
*KS*  
Initials

2419  
Cash, Check Number, or credit card approval #

69453  
Receipt #

MAR 08 2013

# District Candidate Filing

SEL 190

rev 1/12 CRS 230 235

**i** This information is a matter of public record and may be published or reproduced.  Original  Amendment

### Candidate Information

Candidate Legal Name\*

Candidate Name (As it should appear on ballot)\*

Daniel Cornelius Howard

Dan Howard

Filing for Office of\*

District and/or position (if applicable)\*

Director

Position 5 Bly Water + Sanitary

Residence Address, Street/Route\*

P.O. Box 195 19026 Crane St

City\*

State\*

Zip\*

County of Residence\*

Bly

Ore

97622

Klanth

Home Phone

Work Phone

Cell Phone

Fax

541-591-3181

Email Address\*

Date of Election\*

Bly Box 47

May 21, 2013

Mailing Address (where all correspondence will be sent) Street/Route\*

Bly

Ore

97622

City\*

State\*

Zip\*

\* Indicates a required field. At least one phone number is also required.

### Filing Information

Filing with the required \$10.00 fee.

Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required)

Occupational Background previous employment - paid or unpaid (required)

Ranch hand - paid

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)

Last Grade Level Completed

Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)

Course of Study optional

Lakeview High

12

Diploma

Other:

Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

Director, position 5 Appointed 12/14/2011  
By Water & Sanitary District

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*David S. ...*  
Candidate's Signature

1-11-13  
Date Signed

**For Office Use Only**

*Rmb*  
initials

*CA*

Cash, Check Number, or credit card approval #

*69732*

Receipt #

MAR 11 2013

**i** This information is a matter of public record and may be published or reproduced.  Original  Amendment

**Candidate Information**

Candidate Legal Name\*

Gloria L Buchanan

Candidate Name (As it should appear on ballot)\*

Gloria Buchanan

Filing for Office of\*

Director

District and/or position (if applicable)\*

Bly Water & Sanitary position 1

Residence Address, Street/Route\*

161670 Hwy 140E

City\*

Bly

State\*

OR

Zip\*

97622

County of Residence\*

Klamath

Home Phone

541-353-2334

Work Phone

Cell Phone

541-891-3092

Fax

Email Address\*

none

Date of Election\*

05/21/2013

Mailing Address (where all correspondence will be sent) Street/Route\*

PO BOX 545

City\*

Bly

State\*

OR

Zip\*

97622

\* Indicates a required field. At least one phone number is also required.

**Filing Information**

Filing with the required \$10.00 fee.

Filing by petition with the required signature sheets.

**Required Information** (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required)

Retired

Occupational Background previous employment - paid or unpaid (required)

Self employed

**Educational Background** schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)

Last Grade Level Completed

Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)

Course of Study optional

Bly School

10<sup>th</sup> grade

Other:

Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

Elected - Director position 1 7/1/2009 - 6/30/2013  
City Water + Sanitary District

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Daria Guzman  
Candidate's Signature

Feb. 27 2013  
Date Signed

For Office Use Only

DM  
Initials

CA  
Cash, Check Number, or credit card approval #

09042  
Receipt #

This information is a matter of public record and may be published or reproduced.  Original  Amendment

Candidate Information

Candidate Legal Name\*

Candidate Name (As it should appear on ballot)\*

STEVEN EDWARD Cornell  
Bly Water

Steve Cornell

Filing for Office of\*

District and/or position (if applicable)\*

~~19156 Edler St.~~ Dept. Board

Position #5

Residence Address, Street/Route\*

19156 Edler St. P.O. Box 124

City\*

State\*

Zip\*

County of Residence\*

Bly

OR

97622

Klamath

Home Phone

Work Phone

Cell Phone

Fax

541-891-0501

N/A

N/A

N/A

Email Address\*

Date of Election\*

LSPMCornell@yahoo.com

5-21-13

Mailing Address (where all correspondence will be sent) Street/Route\*

P.O. Box 124

City\*

State\*

Zip\*

Bly

OR

97622

\* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee.

Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required)

Occupational Background previous employment - paid or unpaid (required)

retired U.S. Forest Service

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)

Last Grade Level Completed

Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)

Course of Study optional

Romona High School

12

Lassen College

AA

Evergreen State College

Fire Science  
wildlife  
wildlife

Other:

Required Information (if no relevant information, list "none" or "n/a")

Prior Governmental Experience elected or appointed (required)

None

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Candidate's Signature

3-19-13

Date Signed

For Office Use Only

Initials  
LMM

Cash, Check Number, or credit card approval #

70162  
Receipt #

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Candidate Information

Candidate Legal Name\*

Candidate Name (As it should appear on ballot)\*

Robert Lee Tucker

Robert Tucker

Filing for Office of\*

District and/or position (if applicable)\*

Bly Water + Sanitary District

Position 2

Residence Address, Street/Route\*

19280 Edler St.

City\*

Bly

State\*

OR.

Zip\*

97622

County of Residence\*

Klamath

Home Phone

Work Phone

Cell Phone

Fax

541-353-2468

541-281-4659

541-281-4659

Email Address\*

Date of Election\*

May 21<sup>st</sup> 2013

Mailing Address (where all correspondence will be sent) Street/Route\*

P.O. BOX 232

City\*

Bly

State\*

OR

Zip\*

97622

\* Indicates a required field. At least one phone number is also required.

Filing Information

Filing with the required \$10.00 fee.

Filing by petition with the required signature sheets.

Required Information (if no relevant information, list "none")

Occupation present employment - paid or unpaid (required)

Occupational Background previous employment - paid or unpaid (required)

O'Conner Pub  
Dairy, OR.

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)

Last Grade Level Completed

Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)

Course of Study optional

St. John High School

Diploma

Other:

**Required Information** (if no relevant information, list "none" or "n/a")

**Prior Governmental Experience** elected or appointed (required)

Bly Water + Sanitary Board

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Robert Lath

Candidate's Signature

3/20/2013

Date Signed

**For Office Use Only**

YMB

Initials

1870

Cash, Check Number, or credit card approval #

70193

Receipt #