

**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)*	
ELIZABETH Ann Lucht		ELIZABETH "BETTY" Lucht	
Filing for Office of*		District and/or position (if applicable)*	
BOARD of DIRECTORS		KLAMATH 9-1-1 Communication District ZONE 6	
Residence Address, Street/Route*			
4867 HARLAN DRIVE			
City*	State*	Zip*	County of Residence*
KLAMATH FALLS	OR	97603	KLAMATH
Home Phone	Work Phone	Cell Phone	Fax
541-884-6988	N/A	541-892-8786	N/A
Email Address*		Date of Election*	
lucht6@FIRESEERVE.NET		May 21, 2013	
Mailing Address (where all correspondence will be sent) Street/Route*			
4867 HARLAN DRIVE			
City*	State*	Zip*	
KLAMATH FALLS	OR	97603	

\* 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)  
 KLAMATH County DULL TASK FORCE - DIRECTOR - unpaid 2005-2013

**Occupational Background** previous employment – paid or unpaid (required)

OREGON INSTITUTE OF TECHNOLOGY - Paid	1992-2006
OREGON MANUFACTURE SERVICES - Paid	1986-1991
KLAMATH County District ATTORNEY	unpaid 1983-1984
	Paid 1984-1985

**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
KLAMATH Union High School	(12)	H.S. DIPLOMA	GENERAL
ROGUE Community College	(2)	AA CERTIFICATION	CRIMINAL JUSTICE
KLAMATH FALLS BUSINESS COLLEGE	(2)	AA SECRETARIAL	SCIENCE

Other:

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

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

KLAMATH AREA SAFETY COUNCIL - appointed 8 YEARS  
KLAMATH COUNTY SEARCH AND RESCUE - appointed 20+ YEARS  
KLAMATH COUNTY MOUNTED SHERIFF POSSE - appointed 20+ YEARS  
KLAMATH COUNTY DUI TASK FORCE - appointed 20+ YEARS

**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, educational 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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**Warning**

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Elizabeth Ann Leckro  
Candidate's Signature

February 5, 2013  
Date Signed

**For Office Use Only**

Initials: EL Cash, Check Number, or credit card approval #: 10<sup>00</sup> Check # 0939 Receipt #: 68713

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Candidate Information

Candidate Legal Name\* Kenneth R. Paul Candidate Name (As it should appear on ballot)\* Ken Paul

Filing for Office of\* Klamath County Emergency Communications District Zone 2 District and/or position (if applicable)\*

Residence Address, Street/Route\* 5012 Blue Mtn Drive

City\* Klamath Falls State\* Oregon Zip\* 97601 County of Residence\* Klamath

Home Phone Work Phone Cell Phone Fax

Email Address\* pau246@charter.net Date of Election\* 5-21-13

Mailing Address (where all correspondence will be sent) Street/Route\* 5012 Blue Mtn Drive

City\* Klamath Falls State\* or Zip\* 97601

\* 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) Natural Resource, Fire Management, Incident Management

Occupational Background previous employment - paid or unpaid (required) - Instructor for Fire Science at various community colleges, owner of State of Jefferson Fire Management Consulting in Fire Management Issues, Natural Resource Issues. Qualified as an Incident Commander, Safety Officer, Operation Chief, Liaison Officer. worked in fire management Natural Resource Managements for the Forest Service 1976 to 2009 Retired as Fire Chief for the Klamath National Forest.

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

Complete Name of School (no acronyms) University of Montana Last Grade Level Completed Bachelor of Science Course of Study optional Wildlife Biology 1977

Other:

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

Prior Governmental Experience elected or appointed (required)

Incident Commander For Interagency Incident Management Teams

Member of Ad hoc Co-Advisory Committee to County Commissioners for Klamath Air Quality Advisory Committee - 2010 thru 2011.

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**Warning**  
Submitting false information on this form may result in conviction of a crime with a fine of up to \$100,000 and/or imprisonment for up to 5 years. If you are a candidate for office, you are required to file this form with the State Registrar of Elections, 1000 NE Oregon Street, Salem, Oregon 97331. For more information, please visit the State Registrar's website at www.sos.or.gov. If you are not a candidate, you may file this form with the State Registrar, 1000 NE Oregon Street, Salem, Oregon 97331.

*Kenneth B Paul*  
Candidate's Signature

2-15-13  
Date Signed

For Office Use Only  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

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Candidate Information

Candidate Legal Name\* WILLIAM EARL AKINS Candidate Name (As it should appear on ballot)\* BILL AKINS

Filing for Office of\* BOARD MEMBER District and/or position (if applicable)\* KLAMATH COUNTY 911 - ZONE 2

Residence Address, Street/Route\* 23910 OWENS LN.

City\* K-FALLS State\* OR. Zip\* 97603 County of Residence\* KLAMATH

Home Phone Work Phone Cell Phone Fax  
541-891-6623

Email Address\* BILLSPERCH@AOL.COM Date of Election\* MAY 2013

Mailing Address (where all correspondence will be sent) Street/Route\* 23910 OWENS LN.

City\* K-FALLS State\* OR Zip\* 97603

\* 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)  
KLAMATH CO. JUVENILE DEPT.

Occupational Background previous employment - paid or unpaid (required)  
~~XXXXX~~  
OREGON STATE POLICE - 1974  
BUTTE CO. SHERIFF OFFICE - 1972

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
<u>BUTTE J.C.</u>	<u>2 YRS.</u>	<u>AA DEGREE</u>	<u>POLICE SCIENCE</u>

Other:



District Candidate Filing

FEB 20 2013

SEL 190  
rev 1/12 ORS 255.235

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Candidate Information

Candidate Legal Name* ROBERT RANDOLPH SWORD		Candidate Name (As it should appear on ballot)* RANDY SWORD	
Filing for Office of* BOARD MEMBER		District and/or position (if applicable)* KLAMATH COUNTY 911 - ZONE 7	
Residence Address, Street/Route* 4808 DARWIN PLACE			
City* KLAMATH FALLS	State* OR	Zip* 97603	County of Residence* KLAMATH
Home Phone 541-205-3224	Work Phone	Cell Phone 541-331-3883	Fax 541-205-2330
Email Address* RSWORD2715@MSN.COM		Date of Election* MAY 2013	
Mailing Address (where all correspondence will be sent) Street/Route* 4808 DARWIN PLACE			
City* KLAMATH FALLS	State* OR	Zip* 97603	

\* 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)  
PRESIDENT - RJAS ENTERPRISES, INC.

Occupational Background previous employment - paid or unpaid (required)  
1975-1988 CITICORP

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
WEST L.A. COLLEGE	AA	DEGREE IN	BUSINESS MANAGEMENT

Other:

(continued)

SEL 190

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

Prior Governmental Experience elected or appointed (required)

BOARD MEMBER KLAMATH COUNTY SII - ZONE 7  
2011 TO PRESENT

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Candidate's Signature

2/25/13

Date Signed

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Initials

Cash, Check Number, or credit card approval #

Receipt #

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**Candidate Information**

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

Filing for Office of\* *KCEC - 911 - Boardmember* District and/or position (if applicable)\* *District 25 ~~Zone 4~~*

Residence Address, Street/Route\* *5577 American Ave.*

City\* *Klamath Falls* State\* *Oregon* Zip\* *97603* County of Residence\* *Klamath*

Home Phone *541-892-4700* Work Phone Cell Phone Fax

Email Address\* *scntcgirl@charter.net* Date of Election\* *5/21/13*

Mailing Address (where all correspondence will be sent) Street/Route\* *5577 American Ave.*

City\* *Klamath Falls* State\* *Oregon* Zip\* *97603*

\* 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) *Veresa Graham MD Paid & Small Business owner - Paid*

Occupational Background previous employment - paid or unpaid (required)

<i>Veresa Graham MD - office manager</i>	<i>1997 - Present</i>
<i>KCHD</i>	<i>1995 - 1997</i>
<i>Mwmc</i>	<i>1989 - 1994</i>

**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
<i>Klamath Union H.S.</i>	<i>12</i>	<i>H.S. Diploma</i>	<i>general</i>
<i>OTJT. @ KCHD - 2yr course</i>		<i>Certified C.M.A.</i>	<i>general + medical</i>

Other:

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

Prior Governmental Experience elected or appointed (required)

Public Safety Committee - 2010-2011 - Volunteers  
Public Committee

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Candidate's Signature

2-25-13

Date Signed

For Office Use Only

Initials

Cash, Check Number, or credit card approval #

3199

Receipt #