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Candidate Information

Candidate Legal Name* BERTEN David DeWAYNE Candidate Name (As it should appear on ballot)* DAVE DeWAYNE

Filing for Office of* MIDLAND COMMUNITY PARK BOARD District and/or position (if applicable)*

Residence Address, Street/Route* 135 Leach Dr. P.O Box 24 MIDLAND

City* MIDLAND State* OR Zip* 97634 County of Residence*

Home Phone 541-883-1980 Work Phone Cell Phone Fax

Email Address* CCHapel@JIR-TR.com Date of Election* MAY 21 2013

Mailing Address (where all correspondence will be sent) Street/Route* 135 Leach Dr. P.O Box 24 MIDLAND OR 97634

City* MIDLAND State* OR Zip* 97634

* 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) SALES ASSOCIATE HOME DEPOT

Occupational Background previous employment - paid or unpaid (required) U.S. AIR FORCE

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

Table with 4 columns: Complete Name of School (no acronyms), Last Grade Level Completed, Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc), Course of Study optional.

Other:

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

Prior Governmental Experience elected or appointed (required)

member midland community PARK BOARD

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.
- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the 2012 Campaign Finance Manual.



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). No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013 and ORS 249.170).

Candidate's Signature

[Handwritten Signature]

Date Signed

3-17-2013

For Office Use Only

[Handwritten Initials]

CA

70133

Initials

Cash, Check Number, or credit card approval #

Receipt #

District Candidate Filing

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Candidate Information			
Candidate Legal Name*		Candidate Name (As it should appear on ballot)*	
Catherine M. Chapel		Cathy Chapel	
Filing for Office of*		District and/or position (if applicable)*	
Board Member		Midland Community Park Board	
Residence Address, Street/Route*			
111 Leach Drive			
City*	State*	Zip*	County of Residence*
Midland	OR	97634	klamath
Home Phone	Work Phone	Cell Phone	Fax
		541-891-9352	
Email Address*		Date of Election*	
		May 21, 2013	
Mailing Address (where all correspondence will be sent)-Street/Route*			
P.O. Box 404			
City*	State*	Zip*	
Midland	OR	97634	

* 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)
Land Use Manager - Paid

Occupational Background previous employment – paid or unpaid (required)
None

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
Oregon Institute of Technology	2yrs	AS	Secretarial Science

Other:

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

Prior Governmental Experience elected or appointed (required)

Park Board Member - Elected
Roads Advisory - Appointed

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Warning
Candidates must file a Statement of Organization for Candidate Committee (SEL 220) with the State Board of Elections by the deadline of 11/15/12. Failure to file a Statement of Organization for Candidate Committee by the deadline may result in the candidate being ineligible to run for office. For more information, see the 2012 Campaign Finance Manual.

Cary Chapel

Candidate's Signature

2/25/13

Date Signed

For Office Use Only

kmh

Initials

Cash

Cash, Check Number, or credit card approval #

70253

Receipt #

District Candidate Filing

MAR 21 2013

SEL 190

rev 7/12 ORS 255 235

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Candidate Information

Candidate Legal Name* Richard W. Chapel		Candidate Name (As it should appear on ballot)* Richard Chapel	
Filing for Office of* Park Board Member		District and/or position (if applicable)* Midland Community Park	
Residence Address, Street/Route* 111 Leach Drive			
City* Midland	State* OR	Zip* 97634	County of Residence* Klamath
Home Phone	Work Phone	Cell Phone 54-891-9388	Fax
Email Address* rchapel@charter.net		Date of Election* May 21, 2013	
Mailing Address (where all correspondence will be sent) Street/Route* P.O. Box 404			
City* Midland	State* OR	Zip* 97634	

* 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)

Business Owner / Operator

Occupational Background previous employment - paid or unpaid (required)

N/A

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
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Sweet Grass HS	12	Diploma	
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Other:

(continued)

SEL 190

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

Prior Governmental Experience elected or appointed (required)

Park Board Member - Elected

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Candidate's Signature

2/25/13

Date Signed

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Receipt #