

**Candidate Filing  
District**

FEB 11 2015

SEL 190

rev 01/14  
ORS 255.235

**i** All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

**Candidate Information**

**Name of Candidate**

First NORMAN	MI E.	Last FOWLER	Suffix	Title
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**How you would like your name to appear on the ballot**

First NORMAN	MI E.	Last FOWLER	Suffix
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**Candidate Residence/Route Address**

Street Address 9208	City	State	Zip
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**Candidate Mailing Address**

Street Address or PO Box 9208 SPRAGUE RIVER RD	City CHILOQUIN	State OR	Zip 97624
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**Contact Information: Only one phone number is required.**

Work Phone	Home Phone 541-783-3114	Cell Phone 541-891-7136	Fax
Email Address norm@wildspiritranch.com	Web Site, if applicable		

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Office Information**

Filing for Office of: DIRECTOR POSITION #1  
District, Position or County: CHILOQUIN AGENCY LAKE RURAL FIRE PROTECTION DISTRICT

**Occupation (present employment) If no relevant experience, None or NA must be entered.**

RETIRED

**Occupational Background (previous employment) If no relevant experience, None or NA must be entered.**

TELECOMMUNICATIONS

**Educational Background (schools attended)** If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
LA SIERRA ELEMENTARY	6 <sup>TH</sup>		
SAN FRANCISCO JR. ACADEMY	<del>10<sup>TH</sup></del> 10 <sup>TH</sup>	YES	
MONTEREY BAY ACADEMY	12 <sup>TH</sup>	YES	
MODESTO CITY COLLEGE	SOPHOMORE	NO	

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.

DIRECTOR CHILQUIN FIRE DISTRICT @ 8 YEARS

**Campaign Finance Information (not applicable to candidates for federal office)**

**Candidate Committee**

- Yes, I have a candidate committee.
- No, 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 Campaign Finance Manual.
- No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

By signing this document, I hereby state that:

- I will qualify for said office if elected
- all information provided by me on this form is true to the best of my knowledge



**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 at the same election. (ORS 249.013 and ORS 249.170)

*J. C. Lowly*

Candidate's Signature

2/17/15

Date Signed

For Office Use Only

Initials

*AK*

CC Approval Code/Receipt Number

94125

**Candidate Filing**  
District

**SEL 190**

rev 01/14  
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**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix	Title
DAVID	G.	Burnett		

**How you would like your name to appear on the ballot**

First	MI	Last	Suffix
DAVID	G.	Burnett	

**Candidate Residence/Route Address**

Street Address	City	State	Zip
27479 Hwy 97 N.	Chiloquin	OR	97624

**Candidate Mailing Address**

Street Address or PO Box	City	State	Zip
27479 Hwy 97 N.	Chiloquin	OR	97624

**Contact Information:** Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
N/A	N/A	541-281-1320	N/A
Email Address		Web Site, if applicable	
CITATIONUP@AOL.COM		N/A	

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Office Information**

Filing for Office of:

District, Position or County: Board of Director Chiloquin-Agency Lake RFD

Occupation (present employment) If no relevant experience, None or NA must be entered.

POS # 5

RETIRED

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

Owned CITATION upholstery 30 yrs  
 Volunteer firefighter Chil-AL RFD 34rs  
 Board member POS #5 Chil-AL RFD 14R

**Educational Background (schools attended)** If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
N/A			

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.

Board member pos #5 Chel-AL APFD 1 YR

**Campaign Finance Information (not applicable to candidates for federal office)**

**Candidate Committee**

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*David H. Burnett*

Candidate's Signature

2-11-15

Date Signed

For Office Use Only Initials \_\_\_\_\_

CC Approval Code/Receipt Number \_\_\_\_\_

**Candidate Filing  
District**

**VOTER  
FEB 13 2015**

**SEL 190**  
rev 01/14  
ORS 255.235

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**REGISTRATION**

This filing is an

Original

Amendment

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix	Title
Curtis	E	Hoopes	Jr	

**How you would like your name to appear on the ballot**

First	MI	Last	Suffix
Curtis		Hoopes	

**Candidate Residence/Route Address**

Street Address	City	State	Zip
416 S. Lalo Ave.	Chiloquin	Or	97624

**Candidate Mailing Address**

Street Address or PO Box	City	State	Zip
PO 271	Chiloquin	Or	97624

**Contact Information: Only one phone number is required.**

Work Phone	Home Phone	Cell Phone	Fax
		(714) 815-5115	

Email Address	Web Site, if applicable

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Office Information**

Filing for Office of: Director Position #3

District, Position or County: Chiloquin Agency Lake Rural Fire District

**Occupation (present employment) if no relevant experience, None or NA must be entered.**

Retired

**Occupational Background (previous employment) if no relevant experience, None or NA must be entered.**

Law Enforcement / Public safety background

Educational Background (schools attended) If no relevant experience, None or NA must be entered.			
Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Cal. State University Fullerton		Bachelor of Arts	Sociology
Cypress Junior College		Associate of Arts	Sociology
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 Director Position #3: Chiloquin Agency Lake Rural Fire District.  
 Past Budget Committee Chairman: Chiloquin Agency Lake Rural Fire District.

**Campaign Finance Information (not applicable to candidates for federal office)**

**Candidate Committee**

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Candidate's Signature 

2-12-15  
 Date Signed

For Office Use Only Initials \_\_\_\_\_

CC Approval Code/Receipt Number \_\_\_\_\_