

**Candidate Filing
District**

FEB 19 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 GLORIA	MI M	Last STOREY	Suffix	Title MRS
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How you would like your name to appear on the ballot

First GLORIA	MI	Last STOREY	Suffix
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Candidate Residence/Route Address

Street Address 5819 MACK AVE	City KLAMATH FALLS	State OR	Zip 97603
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Candidate Mailing Address

Street Address or PO Box SAME	City	State	Zip
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Contact Information: Only one phone number is required.

Work Phone	Home Phone 541 884-0433	Cell Phone	Fax
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Email Address	Web Site, if applicable
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Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: DIRECTOR - KLAMATH CO. FIRE DIST # 1

District, Position or County: POSITION 3

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.

OFC MGR PELICAN TRACTOR 30+ YRS

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
KVHS	10 th	GED	

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.

20 years as K.C. Fire Dist #1 Director (Elected)

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)

Gloria Storey
Candidate's Signature

2-19-15
Date Signed

For Office Use Only Initials _____

CC Approval Code/Receipt Number _____

**Candidate Filing
District**

**VOTER
FEB 20 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
Michael	D	Jones		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Michael	D	Jones	

Candidate Residence/Route Address

Street Address	City	State	Zip
4319 Sturdivant Ave	Klamath Falls	OR	97603

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
Same			

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
541 885 6658	541 892 5653		

Email Address	Web Site, if applicable
Michael.jones4695@gmail.com	

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: Commissioner
District, Position or County: Klamath County Fire District #1 Position # 2

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

State of Oregon Civil Engineer Superintendent

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

22 Years Retired Air Force Civil Engineer

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
NA			

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.

Klamath County Fire District 1 Commissioner

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

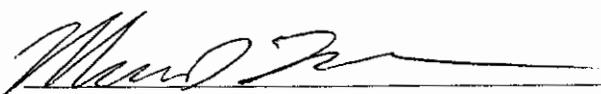
Candidate Committee

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Candidate's Signature

18 Feb 2015
Date Signed

For Office Use Only Initials 

CC Approval Code/Receipt Number 94457

Candidate Filing

District

REGISTRATION

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Amendment

Candidate Information				
Name of Candidate				
First	MI	Last	Suffix	Title
Reid	S.	Sherwin		

How you would like your name to appear on the ballot				
First	MI	Last	Suffix	
Reid	S.	Sherwin		

Candidate Residence/Route Address				
Street Address	City	State	Zip	
6867 Redstart Rd	Klamath Falls	OR	97601	
Candidate Mailing Address				
Street Address or PO Box	City	State	Zip	

Contact Information: Only one phone number is required.			
Work Phone	Home Phone	Cell Phone	Fax
	541 882 4251		
Email Address	Web Site, if applicable		
reidsherwin@hotmail.com			

Filing Information
<input checked="" type="checkbox"/> Filing with the required \$10.00 fee
<input type="checkbox"/> Prospective Petition

Office Information
Filing for Office of: Position 5 Fire District 1 Board
District, Position or County:

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.
NA

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
Vallejo High School	12	Diploma	College Prep
Georgia St. University	16	Degree	BBA
St. Edwards University	19	Degree	MBA

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.

None

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

Candidate Committee

Yes, I have a candidate committee.

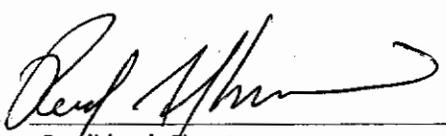
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Candidate's Signature

3/19/2015
Date Signed

For Office Use Only Initials _____

CC Approval Code/Receipt Number _____

VOTER

MAR 19 2015

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Amendment

Candidate Information

Name of Candidate

First Gene	MI D	Last Rogers	Suffix	Title
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How you would like your name to appear on the ballot

First Gene	MI	Last Rogers	Suffix
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Candidate Residence/Route Address

Street Address 1041 Vista Way	City Klamath Falls	State OR	Zip 97601
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Candidate Mailing Address

Street Address or PO Box same	City	State	Zip
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Contact Information: Only one phone number is required.

Work Phone 541 891 2145	Home Phone 541 883 2556	Cell Phone 541 891 2145	Fax 541 883 2556
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Email Address phyrenut@aol.com	Web Site, if applicable —
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Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: KCFD #1 Bd Position

District, Position or County: #5

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

President - Wildland Fire Technologies, Inc.
forestry and wildland fire consultant

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

34 years in US Forest Service Natl Park Service, BLM
various fire positions, supervising and staff

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
Humboldt State University	B.S. 1975	B.S. Natural Resources	Forestry, Nat. Res.
	post-grad 1981		Forestry
University of Washington	mid career focus 1984	certificate	Technical Fire Management

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.

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

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Gene Fog

3/19/15

Candidate's Signature

Date Signed

For Office Use Only

Initials

GF

CC Approval Code/Receipt Number

95413