

Candidate Filing
District

VOTER

MAR 05 2015

SEL 190

rev 01/14
ORS 255.235

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

REGISTRATION

This filing is an

Original

Amendment

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Jeffrey	D	Ball		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Jeffrey	D.	Ball	

Candidate Residence/Route Address

Street Address	City	State	Zip
5801 Basin View Drive	Klamath Falls	OR	97603

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
5801 Basin View Drive	Klamath Falls	OR	97603

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
		541-331-1641	

Email Address	Web Site, if applicable
jdball50@aol.com	

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: Klamath Community College Board of Education
District, Position or County: Zone 2

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.

Klamath Falls City Manager
Klamath Falls City Attorney
Adjunct OIT ~~Teacher~~ Instructor

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
University of Wisconsin-Madison Law School		J.D.	law
Carleton College		B.A.	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.

Klamath Falls City Manager & City Attorney, SCODD Board ~~Board~~
~~Board~~, ~~KCC Board~~, and KCC Board. Plus numerous committees
such as City Parks, County Air Quality, ODOT South Central ACT

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)

Candidate's Signature

[Handwritten Signature]

Date Signed

3-5-15

For Office Use Only

Initials

[Handwritten Initials]

CC Approval Code/Receipt Number

94930