

MAR 11 2009

'09MAR11 10:42AM CLERK

OC

Filing of Candidacy for Special District Nomination

SEL 190
NEW YORK: OPS 368.138

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please type or print legibly in black ink

↓ candidate name

DOUGLAS COX

filing for office of BOARD OF DIRECTOR
LAPINE RURAL FIRE PROTECTION DISTRICT Position 2
how name should appear on ballot district, position or zone number if applicable

DOUGLAS COX
residence address

15480 BROOKS LANE 536-7818
county of residence home phone work phone

DESCHUTES
tax email address date of election

DOUGCOACHING@MSN.COM MAY 19, 2009
mailing address where all correspondence will be sent

15480 BROOKS LANE LAPINE OR. 97739

- Filing of candidacy by declaration, with the required \$10.00 fee.
- Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors or at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials.

required information (if no relevant information, list "None")

↓ occupation present employment - paid or unpaid

RETIRED

occupational background previous employment - paid or unpaid

LAPINE RURAL FIRE PROTECTION DISTRICT MAINTNANCE OFFICER
LAPINE AUTO SUPPLY

↓ educational background schools attended, use attachment if needed



CORVALLIS HIGH SCHOOL DIPLOMA

LINDBERTON C. COLLEGE 1 YR. ENGINEERING

OREGON STATE U.N. 2 YR. ENGINEERING

other

continued on the reverse side of this form

SEL 190

required information (if no relevant information, list "None")

↓ prior governmental experience elected or appointed

BOARDS OF DIRECT OF LAPINE RURAL FIRE PROTECTION DISTRICT
PAST 3 YEARS AND A 4 YEAR TERM FROM ID THE 90'S

By signing this document, I hereby state:

→ that I will qualify for said office if elected

→ that 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:

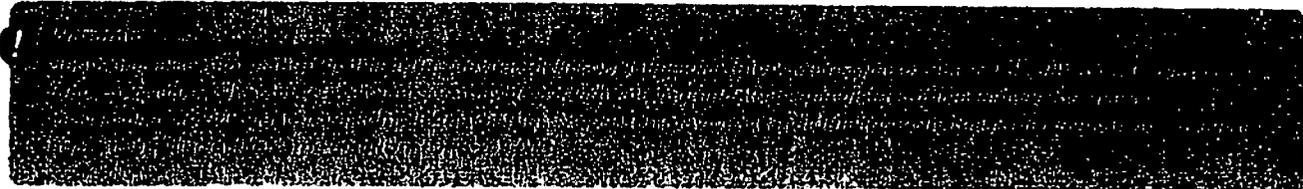
By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than \$300 or receive more than \$300 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$300 during a calendar year, I must follow the requirements detailed in the 2008 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 2008 Campaign Finance Manual.

David A. Cox
candidate's signature

2/10/09
date signed

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for office use only

mjn
initials

\$10.00

cash or check number

16877246
candidate id number

160437
receipt number

office number

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OC

Filing of Candidacy for Special District Nomination

SEL 190
REV 1/08 ORS 255.225

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↓ candidate name

Deborah A Hopman

filing for office of

Deborah A Hopman
how name should appear on ballot

LaPine Rural Fire Protection Director #1
district, position or zone number if applicable

14338 Brown Trout Way LaPine, Oregon 97739
residence address

Deschutes
county of residence

541-536-3201

home phone

541-410-6046
work phone

fax

dah333@hotmail.com
email address

May 19, 2009
date of election

14338 Brown Trout Way LaPine, Oregon 97739
mailing address where all correspondence will be sent

Filing of candidacy by declaration, with the required \$10.00 fee.

Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors or at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials.

required information (if no relevant information, list "None")

↓ occupation present employment - paid or unpaid

Contract Registered Nurse working with Department of Human Services
occupational background previous employment - paid or unpaid
Seniors and People with Disabilities
Contract Nurse for DHE Child Welfare Services
-Home Health and Hospice Nurse for Central Oregon Home Health
-Public Health Nurse for Multnomah County Health Department
-School Nurse for Multnomah Education Service District-
-Emergency and hospital nurse

↓ educational background schools attended, use attachment if needed



University Of Portland BS

BS

Nursing

other

continued on the reverse side of this form

SEL 190

required information (if no relevant information, list "None")

↓ prior governmental experience elected or appointed

Director, LaPine Rural Fire Protection District
Budget committee, LaPine Rural Fire Protection District
School Board Member, Reynolds School District
Brookings-Harbor Health Board

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- that I will qualify for said office if elected
- that 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

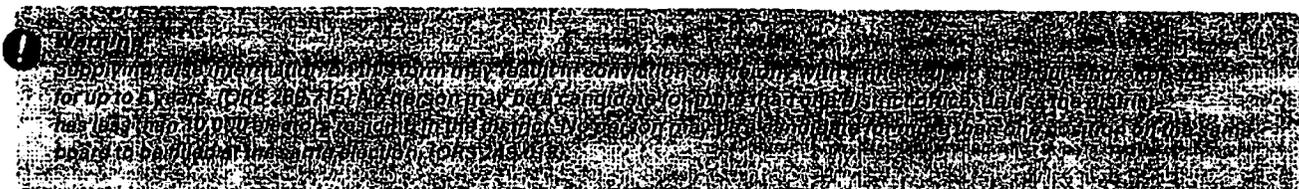
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M. Sarah A. Hopman
candidate's signature

3/18/09
date signed

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10H
initials

\$10.00
cash or check number

16839790
candidate id number

160894
receipt number

office number

'09MAR19 11:53AM CLERK