

Candidate Filing District

SEL 190

rev 01/16
ORS 255.235

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

This filing is an

Original

Amendment

Office Information

Filing for Office of: *Director - Position 2*

District, Position or County: *South Suburban Sanitary District*

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<i>James</i>	<i>J</i>	<i>Bellet</i>		

How you would like your name to appear on the ballot

James Bellet

Candidate Residence/Route Address

Street Address	City	State	Zip
<i>2346 Nile Street</i>	<i>Klamath Falls</i>	<i>Or.</i>	<i>97603</i>

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
<i>2346 Nile Street</i>	<i>Klamath Falls</i>	<i>Or.</i>	<i>97603</i>

Work Phone	Home Phone	Cell Phone	Fax
	<i>541-884-1337</i>		

Email Address	Web Site, if applicable
<i>jb1811@charter.net</i>	

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.

General Contractor



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
Henley High School	12	Diploma	
Oregon State University	16	Degree	Business

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 Commissioner
Klamath Community College board
South Suburban Sanitary District Board
Infrastructure Finance authority Board

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

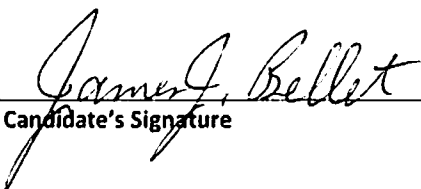
Candidate Committee

- 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).

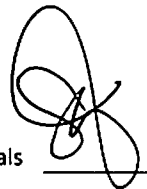
By signing this document, I hereby state that:

- 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

2/28/2019
Date Signed

For Office Use Only Initials 

Candidate Filing District

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Amendment

Office Information

Filing for Office of: **BOARD MEMBER - POSITION 1**

District, Position or County: **SOUTH SUBURBAN SANITARY DISTRICT**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
MICHAEL	G	GRIFFITH		MR.

How you would like your name to appear on the ballot

MICHAEL G. GRIFFITH

Candidate Residence/Route Address

Street Address	City	State	Zip
1045 THOMAS DRIVE	KLAMATH FALLS	OR	97603

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
ABOVE			

Work Phone	Home Phone	Cell Phone	Fax
	541-883-7810		

Email Address	Web Site, if applicable
MIKGRIF@AOL.COM	

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

RETIRED MANAGER

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

14 YRS DIRECTOR OF FACILITIES AT KLAMATH COMMUNITY COLLEGE
23 YRS COMMERCIAL CONSTRUCTION
2 YRS HUGHES AIRCRAFT COMPANY FINANCE

A
X

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
ORA STATE UNIV. FULLERTON		BACHELORS	BUSINESS/ACCOUNTING

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.

SOUTH SUBURBAN SANITARY DISTRICT WAST 6 YRS. - BOARD MEMBER
KLAMATH COUNTY PLANNING COMMISSION 1994-1999

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

Candidate Committee

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Michael S. Giffon

1/25/2019

Candidate's Signature

Date Signed

For Office Use Only Initials _____