

Candidate Filing

SEL 190

rev 01/14
ORS 255.235

District

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

This filing is an

Original

Amendment

Candidate Information

Name of Candidate

First

MI

Last

Suffix

Title

Daniel

Z

Crowe

Mr.

How you would like your name to appear on the ballot

First

MI

Last

Suffix

Daniel

Zene

Crowe

Candidate Residence/Route Address

Street Address

City

State

Zip

11286 Beaverhill Rd NE

Mount Angel

OR

97362

Candidate Mailing Address

Street Address or PO Box

City

State

Zip

PO Box 850

Mount Angel

OR

97362

Contact Information: Only one phone number is required.

Work Phone

Home Phone

Cell Phone

Fax

503-559-4515

Email Address

Web Site, if applicable

dzcrowe@gmail.com

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: Director, Position 1

District, Position or County: MT. ANGEL SCHOOL DISTRICT - 91

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

Attorney

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

Farm Hand, Soldier, Judge Advocate, Attorney

Continued on the reverse side of this form

SEL 190

Handwritten initials/signature

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
John. F. Kennedy High School	12th	High School Graduate	N/A
West Point	16th	Bachelor of Science	Philosophy
Univ. of Washington Law School	19th	Juris Doctor	Law
European School of Mgmt & Tech	20th	MBA	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.

N/A

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).

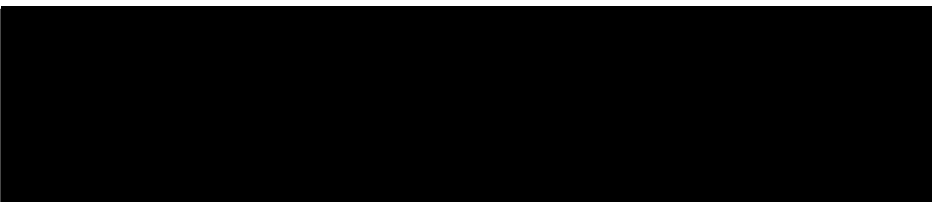
By signing this document, I hereby state that:

- 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)



3/17/15
Date Signed

DEPUTY

BILL JARROLD, COUNTY CLERK

15 MAR 17 P2:21

For Office Use Only

Initials

BJ

CC Approval Code/Receipt Number

203468

**Candidate Filing
District**

SEL 190
rev 01/14
ORS 255.235

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Original

Amendment

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Shari	Bochsler	Riedman		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Shari Bochsler		Riedman	

Candidate Residence/Route Address

Street Address	City	State	Zip
264 Cherry St	Mt Angel	OR	97362

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
PO Box 871	Mt Angel	OR	97362

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
	503-845-6290		

Email Address	Web Site, if applicable
riedman@mtangel.net	

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: Director, School Board

District, Position or County: Mt Angel School District - 91, Position 3

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

Disability Analyst, Clackamas County Human Resources, Oregon City since 1997

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

1994-1997 Claims Adjuster, SAIF Corporation, Salem Oregon

9012
597

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
J F Kennedy High School, Mt Angel	12th	HS Diploma	
Oregon State University		B.A.	Spanish
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.

2014-present Director, Mt Angel School Board
 2013-2014 Budget Committee Member, Mt Angel School District
 2011-2012 Budget Committee Member, Mt Angel Fire District
 2005-2008 City Councilor, Mt Angel

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

Candidate Committee

Yes, I have a candidate committee.

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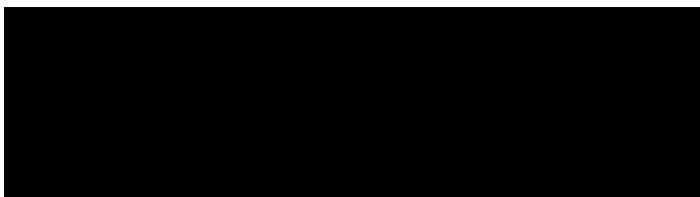
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2-27-15

Date Signed

FILED
 MAJON COURT, OREGON
 15 FEB 27 AM 1:25
 BILL FORGEE, COUNTY CLERK
 DEPUTY

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JF

CC Approval Code/Receipt Number 703404

\$10 of \$35 check total cks 286
 for filing fee and UP

Candidate Filing
District

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This filing is an

Original

Amendment

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Raymond	E	Frey		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Raymond	E	Frey	

Candidate Residence/Route Address

Street Address	City	State	Zip
420 S Pershing St.	Mount Angel	OR	97362

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
420 S Pershing St.	Mount Angel	OR	97362

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
503-845-2800	503-559-7754	503-559-7754	

Email Address	Web Site, if applicable
rssaea@gmail.com	

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: *Office of Director*

District, Position or County: *Mt. Angel School District 91 Position 40*

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

1989-Present Working for a local farming operation, current position controller.

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

NA

ecv

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
John F. Kennedy High School			
Oregon Institute of Technology			

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:

2011 - Present Mt. Angel School Board

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

Candidate Committee

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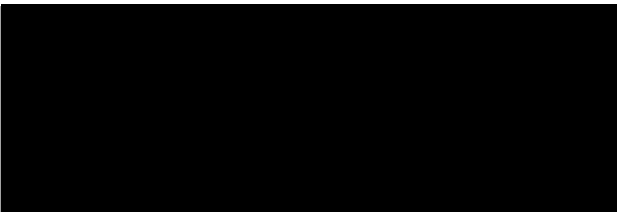
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3-17-2015
 Date Signed

DEPUTY

BILL BURGESS, COUNTY CLERK

15 MAR 17 AM 11:20

HANDWRITTEN CHECKS

For Office Use Only Initials AB

CC Approval Code/Receipt Number 203464