

**Candidate Filing  
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
Tom		Frey		

**How you would like your name to appear on the ballot**

First	MI	Last	Suffix
Tom		Frey	

**Candidate Residence/Route Address**

Street Address	City	State	Zip
8613 Humpert Ln	Mt. Angel	OR	97362

**Candidate Mailing Address**

Street Address or PO Box	City	State	Zip
8613 Humpert Ln	Mt. Angel	OR	97362

**Contact Information:** Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
		503-508-1567	
Email Address tjfrey1@gmail.com		Web Site, if applicable	

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Office Information**

Filing for Office of: Director for Mt. Angel Fire District

District, Position or County: 1

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

Retired IT Director, currently on Mt Angel Fire Board as a Director

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

15 years as a volunteer at Mt. Angel Fire District fire fighter

**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
Oregon State University	College Degree	BS of Computer Science	Information 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.

Board of Directors for Mt. Angel Fire District

**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)

3-20-2019  
Date Signed



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TOM JOHN FREY  
8613 HUMPERT LN NE  
MT ANGEL OR 97362

For Office Use Only

Initials

*JF*

CC Approval Code/Receipt Number \_\_\_\_\_