# **Declaration of Candidacy for Director**

Oregon Soil and Water Conservation Districts



Anthony (T	ony) D. Sher	oherd	Tony Shephero	d
Name of Candidate (r	nay include nickname in p Mi	arentheses) LAST	Name as it is to Appear on Ba	llot
	ce Address Redacte		PO Box 798, Silver	ton, OR. 97381
Residence Address (S	street/Route, City, State, 2	Zip Code)	Mailing Address (if different f	rom residence)
503-873-7687	503-791-8517	tonyshep	herd499@gmail.com	
Phone (Home)	Phone (Work)	Email (options	al)	Race and ethnicity (optional)
I hereby certify the as stated in Orego	at I am an eligible car on Revised Statutes 5	ndidate meetin 68.560(1) for d		
	. Shepherd	Soil and	d Water Conservation District	t for the following position:
	ite position number)			
Zone No. In countie	rectors must reside v enter 1 s with more than 250	1, 2, 3, 4 or 5) ,000 residents	ervation district and be registe (Clackamas, Lane, Marion, Mo thin the zone they represent a	ultnomah,
represent	es with less than 250, ed, own or manage 10	or more acres	zone directors must reside w of land in the zones they rep and be registered voters.	
represent one year a	es with less than 250, ed, indicate an interes	st in natural res ated director o	zone directors must reside w source conservation as demoi f a district and having a conse	

### Semi-retired, Crop Advisor, Pesticide Consultant (AG-LO162848PC)

Occupation (present employment - paid or unpaid) If not relevant experience, "None" or "NA" must be entered.

### Maui Pineapple Co, United Agri Products, Acadian Plant Health

Occupational Background (previous employment - paid or unpaid) If not relevant experience, "None" or "NA" must be entered.

## Oregon Processed Vegetable Commission - current

Prior Governmental Experience (elected or appointed) If no relevant experience, "None" or "NA" must be entered.

Educational Background (schools attended—use attachme	nt if necessar	y) If not relevant experience, "None	e" or "NA" must be entered	
Complete Name of School	Last Grade Completed	Diploma/Degree/Certificate	Course of Study (optional)	
University of Hawaii - Manoa Campus		Bachelor of Science, degree	Horticulture	
University of Hawaii - West Oahu Campus		Bachelor of Arts, degree	Business	

#### Residence Address Exemption

To exempt your residence address from public disclosure, complete form SEL 180 – Residence Address Exemption Request. The request for a Residence Address Exemption MUST include a publicly disclosable mailing address. See the Candidates Manual for further information.

I don't want my residence address to be disclosed. I will be filing a separate SEL 180 - Residence Address Exemption Request.

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Campaign	LIBBOAR	Information
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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, based on provided documentation, for said office if elected; and
- All information provided by me on this form is true to the best of my knowledge; and
- I will accept the office of the SWCD director if elected to the position.

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August 15, 2024

Date

WARNING: Supplying false information on this form may result in the conviction of a felony with a fine of up to \$125,000 and/or prison for up to five years (ORS 260.715). No person may be a candidate for more than one position on the same board to be filled at the same election (ORS 249.013).

Return this form, along with the Petition for Nomination Signature Sheet: By email to sandi.hiatt@oda.oregon.gov or mail to: Oregon Department of Agriculture, Attn: Grants Administrative Officer 635 Capitol St. NE, Suite 100 Salem, OR 97301 Filing deadline:

5:00 p.m. August 27, 2024