

MAR 07 2025

Candidate Filing District

SEL 190

rev 12/24
ORS 255.235

i This form must be filed with county elections official. All information must be completed or the form will be rejected.

2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

Original

Amendment

Office Information

Filing for Office of: *Director*

District, Position or County: *Aumsville Rural Fire Protection District, Position #2*

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First
Rachel

MI
A

Last
Fellis

How you would like your name to appear on the ballot

Rachel Fellis

Candidate Residence/Route Address

Street Address

949 Highberger Loop

City

Aumsville

State

OR

Zip

97325

Candidate Mailing Address and Contact Information

Street Address or PO Box

N/A

City

N/A

State

N/A

Zip

N/A

Work Phone

N/A

Home Phone

503-877-8756

Cell Phone

N/A

Email Address

rachelfellis1@gmail.com

Web Site, if applicable

N/A

Race and Ethnicity *Optional*

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

Program Analyst 1

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

*9 yrs Oregon State Police
10 yrs Oregon State Fire Marshal*

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
N/A	N/A	N/A	N/A

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.

7 yrs Board Director for Aumsville Rural Fire Protection District

Campaign Finance Information

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

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.

Candidate Attestation

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. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

Signature Redacted

Md
COUNTY CLERK
SANDRA STOF
25 MAR -7 P 2:20

3/7/2025

Date Signed

FILED
CLERK SANDRA STOF
CLERK SANDRA STOF

MARION COUNTY
BILL BURGESS
MARION COUNTY CLERK

Receipt #: 51469
Station: 11
Receipt Name: RACHEL FELLIS

Receipt Date: 03/07/2025 02:19 PM
Cashier: PK

Comments:

CUS. . . COPY
03/07/2025 02:16 PH PST
MARION CO CLERK
555 COURT ST. NE
SUITE 2130
SALEM, OR 97309
TERMINAL NAME: E1595661
ORDER# 197574115
PAYMENT
CLERK FEES \$10.00
AGENCY SUBTOTAL: \$10.00
LEXISNEXIS SERVICE FEE: \$2.50
TOTAL USD: \$12.50

CARD #: 9392 VISA
PAYMENT: DEBIT CHIP READ-CONTACT
MODE: ISSUER
AUTH CODE: 472236
APP LABEL: US DEBIT
CVM: PIN VERIFIED
AID: A0000000980840
AROC: 3F96A9EC55689317
AMOUNT: \$12.50
*** CARD APPROVED ***

AMOUNT PAID:
\$12.50

SIGNATURE NOT REQUIRED
AGENCY COPY

Thank You!
BILL BURGESS, MARION COUNTY CLERK

Please retain this receipt for your records.

Documents are recorded as submitted. The Marion County Clerk's Office assumes no liability for sufficiency, validity, or accuracy.

Miscellaneous Fees		
Candidate Fee - Fire Districts	AUMSVILLE RFPD	\$10.00

Receipt Total		
CREDIT CARD	197574115	\$10.00