



Marion County
OREGON
COUNTY CLERK

COUNTY CLERK
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CANDIDATE'S STATEMENT FOR MARION COUNTY VOTER PAMPHLET
NOVEMBER 3, 2020 GENERAL ELECTION

FILE THIS FORM WITH THE MARION COUNTY ELECTIONS OFFICE

Participation in the Marion County Voter Pamphlet is optional. Only information submitted and paid for by candidates or committees will be published. The purpose of the Marion County Voter Pamphlet is to provide information to our voters. All materials submitted for filing are public record as defined in ORS Chapter 192.

INSTRUCTIONS FOR SUBMITTING A VOTER PAMPHLET CANDIDATE'S STATEMENT

Photographs

Photographs are optional.

If you choose to submit photographs, submit two (2) identical photographs (5" x 7" are recommended, portrait orientation). The photographs will not be returned to you.

Photographs **must**:

- Be less than four (4) years old.
- Be front facing - showing full face, neck, and shoulders (will be cropped right below the shoulders).
- Have a **plain background** - a light gray background is recommended.

A photograph containing the following will not be accepted: any accessories that may be construed as representing any organization such as a judicial robe, any uniform, hat, lapel pin, jewelry, insignia, hands, or signs. Backgrounds with paneling, wallpaper, windows, brick, tile, pattern, flags, plants, other people, animals, or landscaping.

In addition, photographs **may** be submitted on a CD or USB media but **must**:

- Be in a JPEG format.
- Be able to be reproduced to a finished gray scale picture that is 1.5" x 1.75", 300 dpi.
- Be accompanied with a print out of the photo at the time of filing.

Any photos not meeting these requirements will not be accepted.

Any replacement photos must be submitted by the filing deadline.

continued: →

Candidate's Statement

1. The Candidate's Statement must be **typewritten** and in English only. It is suggested this statement be submitted electronically along with your photo on a CD, saved as plain text file format along with a copy of the statement that shows any underlining, bolding or italics text. The statement may be created with a word processor and attached to a signed and dated form with a notice to "see attached."



Handwritten statements will not be accepted.



2. The combined word count total for PART ONE and PART TWO must not exceed 325 words. This **includes** the seven bolded headings in PART ONE; **Occupation, Occupational Background, Educational Background, and Governmental Experience**. The word count total must be written in PART TWO where indicated.
3. The statement will be printed exactly as submitted; Marion County Elections does not correct spelling, grammar or punctuation errors.
4. Formatting options are allowed (i.e., bold, italics, underline, indentations, asterisks, etc). Due to space requirements and limitations, formatting may be altered at the discretion of Marion County Elections.
5. PART ONE "**REQUIRED INFORMATION**" must be signed by the **Candidate**. PART TWO "OPTIONAL INFORMATION" must be signed by either the candidate or the person responsible for the content of that section.
6. Information cited or quoted from previously published material MUST INCLUDE the source and date of publication within the statement and will be included in the word count.
7. Endorsements in the statement by persons or organizations, which have not been previously disseminated to the public, will not be printed unless a written authorization (Form SEL 400) from the person or a person representing the organization is filed with the county clerk by 5:00 p.m. on the deadline for filing statements.
8. Any verbiage in the candidate statement in violation of ORS 251.415 may be excluded by the county clerk. Marion County Elections will give notice to the candidate if such exclusion occurs.
9. The content of all candidate statements is exempt from public disclosure until the fourth business day after the filing statement deadline.
10. If the Candidate's Statement exceeds the 325 word limit, the county clerk shall end the statement at 325 words.
11. Statements will not be returned to candidates for proofreading.
12. This form will not be accepted without the **required** filing fee:

Jurisdiction's Voter Registration
Less than 1,000 within a county/city
1,000 to 9,999 within a county/city
10,000 to 49,999 within a county/city
50,000 and over within a county/city

Candidate Fee
\$ 25.00
\$ 50.00
\$100.00
\$300.00

13. Voters' pamphlets are prepared county by county. If you will be on the ballot in more than one county and you would like to have your materials in voters' pamphlets for more than one county, you must file a completed candidate's statement, photograph and filing fee with each county separately.

If you have questions or comments, please call Marion County Elections at (503) 588-5041 or 1-800-655-5388 if out of the local area.

CANDIDATE'S STATEMENT FOR VOTERS' PAMPHLET

NAME OF CANDIDATE _____

OFFICE _____

DISTRICT/CITY _____

POSITION, WARD OR ZONE NUMBER _____



PART ONE: REQUIRED INFORMATION - MUST BE TYPED (Attached word processed document is acceptable) The seven bolded words are included in the word count.

Occupation: *(Present employment -- may be paid or unpaid)*

Occupational Background: *(Previous employment -- may be paid or unpaid)*

Educational Background: *(Schools attended; last grade completed; degree(s), if any)*

Governmental Experience: *(Elected or appointed)*

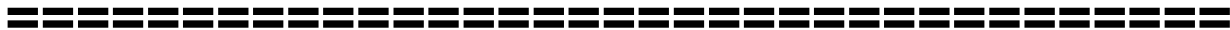


By signing this form I HEREBY CERTIFY THAT all information supplied by me about my occupation, educational and occupational background, and prior governmental experience is true to the best of my knowledge.

Candidate's Signature _____
Must Be Signed by the Candidate

Date _____

PART TWO: OPTIONAL INFORMATION - - MUST BE TYPED (Attached word processed document is acceptable)



WORD COUNT - REQUIRED INFORMATION:

Part One Total _____
+ Part Two Total _____
= Grand Total _____ (325 max)

This information furnished by _____
(Print the name of the Candidate or Person responsible for the content of PART TWO of the Candidate's Statement)

Signature of the Candidate or Person responsible

Date Stamp→

↓↓ *The space below is reserved for Office use only* ↓↓

Amount Paid: _____
Cash ___ Debit/Credit _____ Check # _____
Receipt # _____

Statement typed: Yes _____ No _____
Photos: Yes _____ No _____
CD/USB: Yes _____ No _____
Endorsements: Yes _____ No _____
Staff initials: _____