

Candidate Filing
District

VOTER
FEB 17 2015

SEL 190
rev 01/14
ORS 255.235

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

REGISTRATION

This filing is an

Original

Amendment

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Robbie	D	Cox		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Rob		Cox	

Candidate Residence/Route Address

Street Address	City	State	Zip
11771 Mallory Dr	Klamath Falls	OR	97603

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
Same as above			

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
		541 331 5742	

Email Address	Web Site, if applicable
rb_cox@yahoo.com	

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Office Information

Filing for Office of: Pipe Grove Water Director

District, Position or County: Position # 2

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

N/A

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

N/A

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
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.

NA

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).

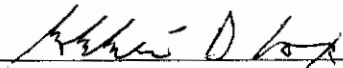
By signing this document, I hereby state that:

- 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)


Candidate's Signature

17 Feb 2015
Date Signed

For Office Use Only Initials ADL

CC Approval Code/Receipt Number 94311

Candidate Filing
District

VOTER
MAR 12 2015
SEL 190
rev 01/14
ORS 255.235

REGISTRATION

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Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Linda	E	Gelhardt		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Linda		Gelhardt	

Candidate Residence/Route Address

Street Address	City	State	Zip
3907 Christine Lane	Klamath Falls	OR	97603

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
3907 Christine Lane	Klamath Falls	OR	97603

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
541-884-1717		541-891-8923	

Email Address	Web Site, if applicable
legandrag@charter.net	

Filing Information

Filing with the required \$10.00 fee
 Prospective Petition

Office Information

Filing for Office of: Board Member
District, Position or County: Pine Grove Water District Position #1

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

NA

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

NA

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
NA			

Educational Background (other) Attach a separate sheet if necessary.

NA

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

NA

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

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Linda Melhardt

Candidate's Signature

3/12/15

Date Signed

For Office Use Only Initials _____

CC Approval Code/Receipt Number _____