Filing of Candidacy for Nonpartisan Nomination

SEL 120

rev.02/11: 0AS 249 031

ightarrow This information is a matter of public record and may be published or reproduced.

O Secretary of State O City Recorder (Au	•	Ø County Elections C	Official of	- math	_ County	
Candidate and Party	Information		Segment of the segmen			
O Incumbent for Off	fice of Judge					
Candidate Name	_		Filing for Office	of		
Rafael Ivan Her		H 1 - 1000 F F F F F F F F F F F F F F F F F	Assessor	annumannum n maga n		
How Name Should A Rafael Ivan Her			District or Positi	on Numbe r	1 (A) 1 (A) 2 (A) 2 (A) 2 (A) 2 (A)	41 5 41 5 42 7 42 7
Residence Address, \$ 2442 6th St	Street/Route					7. A 7. A 8. A
City		State	Zip Code	County of Residence	, C.	
Malin		OR	97632	Klamath	and the	
Home Phone		Work Phone		Cellular Phone	l.>	C"3
		541-883-5111		541-591-5373	t ey	To any public
Fax	Email Address rafael_i_hernan	dez@hotmail.com	Website		4 . S•	20 D
Mailing Address whe	ere all correspondence	will be sent, Street/Re	oute			
City Malin		State OR	Zip Code 97632			7 10 10 10 10 10 10 10 10 10 10 10 10 10
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Malin Filing Type	by Declaration, with t	*	97632			
Malin Filing Type	by Declaration, with t	OR	97632 (ORS 249.056)	Filing Fee State Voters' Pamphlet (ORS 251.095)	Petition Required	Signatures
Malin Filing Type ⊙ Filing of Candidacy	by Declaration, with t	OR the Required Filing Fee Filing of Candidacy b	97632 (ORS 249.056)	Voters' Pamphlet		-
Malin Filing Type ● Filing of Candidacy Filing Fees: Statewide Offices Circuit Court Judge	by Declaration, with t	OR the Required Filing Fee Filing of Candidacy b (ORS 249.056) \$100 \$50	97632 (ORS 249.056)	Voters' Pamphlet (ORS 251.095) \$3000 or \$600 or	Required	-
Malin Filing Type ● Filing of Candidacy Filing Fees: Statewide Offices Circuit Court Judge District Attorney	by Declaration, with t	che Required Filing Fee Filing of Candidacy b (ORS 249.056) \$100 \$50 \$50	97632 (ORS 249.056)	Voters' Pamphlet (ORS 251.095) \$3000 or \$600 or \$600 or	500 300 300	-
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Required Information (if no relevant inform			10 and 1 mark and 20 May 1955. See a group of the control of the c
Occupation present employment - paid or o	unpaid		
Klamath County Assessor			10.000
Occupational Background previous employ	ment – paid or unpaid		
I have worked for the Klamath Co Assessor in March of 2011 after the was the Office Manager for the d Appraiser for almost 9 years.	the resignation of the	previous Assessor. Prior to	the appointment, I
			THE RESIDENCE OF THE PARTY OF T
Educational Background schools attended, Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
Oregon Institute of Technology		BA	Business Management
Lost Pivor High-School	12	High-School Diploma	
Lost River High-School	14	nigh-school Diploma	None also Immania minimum 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12
Prior Governmental Experience elected or	appointed		
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 → that will accept the nomination for office 	e indicated		
→ that I will qualify for said office if elected			
→ that all information provided by me on this and prior governmental experience, is tru			ackground,
Check the applicable box (not applicable to	candidates for federal office	e – US Senate and US Bepresentative	1:
By marking this box, I certify I do not hav or receive more than \$750 during each ca if total contributions or total expenditures Campaign Finance Manual.	e an existing candidate's co alendar year. I understand I	ommittee and I do not expect to spend must still keep records of all campaig	d more than \$750 n transactions and
By marking this box, I certify that I have a	already filed or will soon file	a Statement of Organization for Cand	didate Committee
(SEL 220). For detailed instructions, see t			
	1		
Refer In That	· 82.1	09/08/2011	·
Candidate's Signature		Date Signed	
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This information is a matter of public	recora ana may be pub	usnea or reproaucea.	
Warning Supplying false information on this for 5 years. (ORS 260.715) A person may			
from the first filing, all filings are invali			- Contrac Williams
For Office Use Only			
Initials	Cash or Check Number	Candidate ID No	umber
Receipt Number	Office Number	Candidate Com	mittee ID Number
receipt warner	Attice Number	Canquate Com	THILLE IS NUMBER

Filing of Candidacy for Nonpartisan Nomination

SEL 120

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O City Recorder	_	4	· · · · · · · · · · · · · · · · · · ·	cruc 1		oouncy
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Candidate and Pa	•					
O incumbent for	Office of Juage		·			- Norman I W. W. The China general section of the section of
Candidate Name	4 1/1/	/	Filing for Office o	f ,	1	
Leans	ind Hill	,		Count	$y H_{-}$	SSESSOY
How Name Shou	Id Appear on Ballot		District or Position	n Number /	/ / (The second secon
Lenn	ard Hill	•				
Residence Addres	ss. Street/Route					
	Blue Mou,	tain D	V			
City 1	Dive Mous	State	Zip Code	County	of Residen	
	11 1 11					
K(ama	th talls	UK,	97601	Cellular	lam	atli
Home Phone	· - ·	Work Phone	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Cellular	Phone	
541-88	4-3125	541-8	P83-5111	54	4-29	12-6618
Fax	Email Address		Website		,	
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Mailing Address	where all correspondence	will be sent Street	/Route			
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Required Information (if no relevant inform	nation, list "none")		
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*I worked in	the Appro	risal Dept., and	ast last
positio,	n was an #	Appraisal Review	ver.
Educational Background schools attended Complete Name of School no acronyms	, use attachment if neede Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
Oregon State Uni	Versity	BS 1974	
		·	
		<u> </u>	
Other:			
Prior Governmental Experience elected or	appointed		
By signing this document, I hereby state:			
 that I will accept the nomination for office that I will qualify for said office if elected 			
→ that all information provided by me on th	is form, including my occi	·	ackground,
and prior governmental experience, is tru	ue to the best of my know	rledge	
Check the applicable box (not applicable to		•	
By marking this box, I certify I do not have or receive more than \$750 during each call total contributions or total expenditure.	alendar year. I understand	I must still keep records of all campaig	gn transactions and
Campaign Finance Manual.		ila a Chahamanh af Osmanination for Cou	d'alana (Canana) interna
By marking this box, I certify that I have (SEL 220). For detailed instructions, see			didate Committee
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(AU	<u>//</u>		70-//
Candidate's Signature		Date Signed	
This information is a matter of public	record and may be pu	blished or reproduced.	
Warning Supplying false information on this fo	rm may result in conviction	n of a felony with a fine of up to \$125,00	00 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	
from the first filing, all filings are inval	iu. (Uno 248.013(3))		
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For Office Use Only			
For Office Use Only	1620		
For Office Use Only Initials	(Cash or Check Number	Candidate ID N	umber

Office Number

Candidate Committee ID Number

Receipt Number