

Candidate Filing

SEL 190

rev 01/16
ORS 255.235

District

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

This filing is an

Original

Amendment

Office Information

Filing for Office of: Board of Director

District, Position or County: Basin Transit Service

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Erik	B	Nobel		

How you would like your name to appear on the ballot

Erik Nobel

Candidate Residence/Route Address

Street Address	City	State	Zip
<u>2002 Kimberly Dr</u>	<u>Klamath Falls</u>	<u>OR</u>	<u>97603</u>

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
<u>2002 Kimberly Dr</u>	<u>Klamath Falls</u>	<u>OR</u>	<u>97603</u>

Work Phone	Home Phone	Cell Phone	Fax
		<u>541-892-2292</u>	

Email Address | Web Site, if applicable

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

Klamath County Planner III

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

City of Klamath Falls Planning Manager

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
Oregon State University		B.S.	Range
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.

- 23 year of experience work in Local government
→ 17 years with the City of Klamath Falls
→ 6 year with Klamath County

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)

3-20-19

Candidate's Signature

Date Signed

For Office Use Only Initials _____

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Amendment

Office Information

Filing for Office of: **District Board Member**

District, Position or County: **Klamath Basin Transportation Services District**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Marc	T	Kane		

How you would like your name to appear on the ballot

Marc Kane

Candidate Residence/Route Address

Street Address	City	State	Zip
1855 Calhoun Street	Klamath Falls	OR	97601

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip

Work Phone	Home Phone	Cell Phone	Fax
541-883-7171 Ext 117			541-883-1993

Email Address	Web Site, if applicable
gm4marc@gmail.com	

Occupation (present employment) If not employed, enter "Not Employed".

Executive Director
Klamath Basin Senior Citizens' Center
also
Self Employed as an independent health insurance agent associated with Klamath Insurance Center

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

Senior Fellow, American Institute for Full Employment, Klamath Falls
Lobbyist for Hire Calling Public Affairs, Klamath Falls
Executive Director and Founder of REACH, Inc., Klamath Falls
Manager, Developmental Disabilities Programs, Klamath County Mental Health
Superintendent, Eastern Oregon Training Center, Pendleton, Oregon
Executive Director, Star of Hope Activity Center, North Bend, Oregon
other previous employment in the State of Colorado and Missouri

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
University of San Francisco		MRA	Rehabilitation Administration
Intyernational Association of Workforce Professionals		Workforce Development Master	
St. Benedicts College, Atchison Kansas		BA	Psychology/Sociology
JK Mullen High School, Ft. Logan, Colorado	12	High School Diploma	

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.

Presently elected board member to the Klamath Basin Transportation Services District
 Past Member of the Overall Klamath County Economic Development Committee
 Past Director and Budget Committee Member for the Klamath City Fire District
 Past Klamath County Housing Commissioner (ten years)
 Past board member for the City of North Bend Library

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

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Candidate's Signature

3/19/2019
Date Signed

For Office Use Only Initials

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Amendment

Office Information

Filing for Office of:

BOARD OF DIRECTORS

District, Position or County:

Basin TRANSIT SERVICE

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Rolland

MI

C

Last

BAILEY

Suffix

MR

Title

How you would like your name to appear on the ballot

Rolland BAILEY

Candidate Residence/Route Address

Street Address

176 Dahlia ST.

City

KIAMATH FALLS

State

OR

Zip

97601

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box

176 Dahlia ST

City

KIAMATH FALLS

State

OR

Zip

97601

Work Phone

Home Phone

Cell Phone

541 581-3352

Fax

Email Address

rbailey43@msn.com

Web Site, if applicable

Occupation (present employment) If not employed, enter "Not Employed".

SENIOR CENTER

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

PRESENT BOARD MEMBER FOR 22 YEARS



Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
SACRED HEART	12 TH	DIPLOMA	GENERAL
OREGON TECH	24R	DEGREE	ACCOUNTING

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.

22 YEARS BASIN TRANSIT

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

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Relland C. Barky
Candidate's Signature

3/18/2019
Date Signed

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