

Candidate Filing  
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: MF School board

District, Position or County: Umatilla Pos 7

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Kathleen	M	Silva		

How you would like your name to appear on the ballot

Kathy Silva

Candidate Residence/Route Address

Street Address	City	State	Zip
52271 Records Ln	MA	OR	97862

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

Street Address or PO Box	City	State	Zip
52271 Records Ln	MA	OR	97862

Work Phone	Home Phone	Cell Phone	Fax
	541 938 6356	509 520 7402	

Email Address	Web Site, if applicable
silvakathy1956@gmail.com	

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

NONE

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

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.**

**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

Date Signed

1-14-19



10207

MAR 21 2019

Candidate Filing  
District

SEL 190

rev 01/16  
ORS 255.235

**E** All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

Office Information

Filing for Office of: *M-F Unified School Dist.*

District, Position or County: *School Board Position #5*

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<i>Kelly</i>	<i>S</i>	<i>Kessler</i>		

How you would like your name to appear on the ballot

*Yes*

Candidate Residence/Route Address

Street Address	City	State	Zip
<i>85502 Winesap Rd</i>	<i>Molton-Freewater</i>	<i>OR</i>	<i>97862</i>

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

Street Address or PO Box	City	State	Zip
<i>Same</i>			

Work Phone	Home Phone	Cell Phone	Fax
		<i>509-540-8818</i>	

Email Address	Web Site, if applicable
<i>Kelly.Kessler169@gmail.com</i>	

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

*Polaros Tech @ Don Johnson sales inc*

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.

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

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X



3-19-19

Date Signed

# 3320

For Office Use Only Initials \_\_\_\_\_

Candidate Filing  
District

MAR 20 2019

SEL 190

rev 01/16  
ORS 255.285

**E** All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

Office Information

Filing for Office of: SCHOOL BOARD

District, Position or County: MILTON FREEWATER USD POSITION #1

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<u>MICHAEL</u>	<u>R</u>	<u>LESKO</u>		

How you would like your name to appear on the ballot

MICHAEL R. LESKO

Candidate Residence/Route Address

Street Address	City	State	Zip
<u>85466 TUM A LUM RD</u>	<u>MILTON FREEWATER</u>	<u>OR</u>	<u>97862</u>

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
<u>541.566.3515</u>		<u>509.520.7682</u>	

Email Address	Web Site, if applicable
<u>mike-lesko@smithfrozenfoods.com</u>	

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

HUMAN RESOURCES MANAGER

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

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
WITTENBERG UNIVERSITY		B.A.	Psychology

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.

SCHOOL BOARD MEMBER

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

Candidate Committee

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X

3.18.19

Date Signed

For Office Use Only Initials \_\_\_\_\_