

Candidate Filing District

SEL 190
rev 01/16
ORS 255.235

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

This filing is an Original Amendment

Office Information

Filing for Office of: Umatilla School District

District, Position or County: Position 3

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First <u>Jennifer</u>	MI	Last <u>Armstrong</u>	Suffix	Title
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How you would like your name to appear on the ballot

Jennifer Armstrong

Candidate Residence/Route Address

Street Address <u>32 Rio Senda</u>	City <u>Umatilla</u>	State <u>OR</u>	Zip <u>97882</u>
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Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box <u>PO Box 1290</u>	City <u>Umatilla</u>	State <u>OR</u>	Zip <u>97882</u>
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Work Phone	Home Phone	Cell Phone <u>541 720 1037</u>	Fax
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Email Address <u>gorge.arnp@gmail.com</u>	Web Site, if applicable
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Occupation (present employment) If no relevant experience, None or NA must be entered.

Nurse Practitioner

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

Umatilla Hospital District
Eastern Oregon Alcohol Foundation
Dr Gifford

Continued on the reverse side of this form
541-278-5467

SEL 190

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
Washington State University		Masters of Nursing	Nurse Practitioner
Beihel College of Nursing		Bachelors of Nursing	
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.

N/A

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)

Cand _____ Date Signed _____

X

Candidate Filing
District

FEB 28 2019

SEL 190

rev 01/16
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Original

Amendment

Office Information

Filing for Office of:

UMATILLA SCHOOL BOARD

District, Position or County:

Position 4

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
JON	C	LORENCE		

How you would like your name to appear on the ballot

JON LORENCE

Candidate Residence/Route Address

Street Address	City	State	Zip
81670 OXBOW LN	UMATILLA	OR	97882

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) 571-2894	(541) 571-2459		

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

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

Door & Millwork SALES

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
WESTERN WASHINGTON UNIV		B.A.	FINANCE

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.

CURRENT SCHOOL BOARD MEMBER
UMATILLA RURAL FIRE DIST. BOARD MEMBER

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

Candidate Committee

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2/21/19

Date Signed

3268

For Office Use Only Initials _____

Candidate Filing
District

MAR 14 2019

position 5

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Office Information

Filing for Office of:

Umatilla School Dist.

District, Position or County:

position 5

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Melisa

MI

A

Last

Webb

Suffix

Title

How you would like your name to appear on the ballot

Melisa A. Webb

Candidate Residence/Route Address

Street Address

28693 Frontier Lane

City

Umatilla

State

OR

Zip

97882

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

Street Address or PO Box

same

City

State

Zip

Work Phone

541-701-0545

Home Phone

541-571-3574

Cell Phone

same

Fax

509-930-6011

Email Address

melisawebb@me.com

Web Site, if applicable

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

Branch Manager, American Pacific Mortgage

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
Blue Mountain Community		AA	Business

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.

previous position 5 school board member

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

Candidate Committee

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3-11-19

Date Signed

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FEB 28 2019

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Amendment

Office Information

Filing for Office of: Board Umatilla School Dist

District, Position or County: Pos 3

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
<u>Toby</u>	<u>D</u>	<u>Cranston</u>		

How you would like your name to appear on the ballot

Toby D Cranston

Candidate Residence/Route Address

Street Address	City	State	Zip
<u>809.35 Conway LN</u>	<u>Hermiston</u>	<u>OR</u>	<u>97838</u>

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

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

Work Phone	Home Phone	Cell Phone	Fax
<u>N/A</u>	<u>N/A</u>	<u>541-701-8813</u>	

Email Address	Web Site, if applicable
<u>[Redacted]</u>	<u>cranston7@umatillaSD.ORG</u>

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

Mechanic

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

TRANSMISSION Specialist 24yrs
Current Board Member.

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
High school GRAD	12	Yes	General
UTI Tech school	2yrs	Associate Deg.	

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~~ 18yrs on the School Board

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

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Candidate's



2/21/19
Date Signed

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Office Information

Filing for Office of:

Umatilla School Board

District, Position or County:

Umatilla Position 2

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Veronica		Gutierrez		

How you would like your name to appear on the ballot

Veronica Gutierrez

Candidate Residence/Route Address

Street Address	City	State	Zip
221 Walla Walla St	Umatilla	OR	97882

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
		541-720-7780	

Email Address	Web Site, if applicable
JoeIron3@AOL.COM	

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

Receptionist

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

Sales, Customer Service,

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
Chulavista Community College		G.E.D	
Gallien College of Medical Asst		Certificate	

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.

Current School Board member

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

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Date Signed

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