

**Candidate Filing
District**

MAR 16 2023

SEL 190

rev 08/22
ORS 255.235

i This form must be filed with county elections official. All information must be completed or the form will be rejected.

2023 District Election Filing Dates

Candidate Filing February 4, 2023 to March 16, 2023

Withdrawal Date March 16, 2023

This filing is an

Original

Amendment

Office Information

Filing for Office of: Umatilla Hospital District

District, Position or County: Position 2, Umatilla

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

MI

Last

Suffix

Brett

J.

Cahill

How you would like your name to appear on the ballot

Brett Cahill

Candidate Residence/Route Address

Street Address

190 Tyler Ave

City

Umatilla

State

OR

Zip

97882

Candidate Mailing Address and Contact Information

Street Address or PO Box

190 Tyler Ave

City

Umatilla

State

OR

Zip

97882

Work Phone

Home Phone

Cell Phone

541-571-2752

Fax

Email Address

brettjcahill@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

Vulnerabilities Analyst at Hanford

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

Military Intelligence in United States Army
Procurement Analyst with PPM Technologies, LLC

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Office Information

Filing for Office of: **Board of Director Position #1**

District, Position or County: **Umatilla Hospital District #1**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix
Darla		Huxel	

How you would like your name to appear on the ballot

Darla Huxel

Candidate Residence/Route Address

Street Address	City	State	Zip
415 Stephens Av	Umatilla	OR	97882

Candidate Mailing Address and Contact Information

Street Address or PO Box	City	State	Zip
P.O. Box 584	Umatilla	OR	97882

Work Phone	Home Phone	Cell Phone	Fax
541-922-3789	541-922-2600	541-561-8403	

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

Race and Ethnicity *Optional*

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

Police Chief - City of Umatilla

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	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Western Oregon	11		Criminal Justice
Blue Mountain Community College		AA	Criminal Justice
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 Board Member

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

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

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)

02/27/2023

Date Signed

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Office Information

Filing for Office of: **Director, position #4.**

District, Position or County: **Umatilla Hospital District**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Douglas

MI

W

Last

Rothrock

Suffix

How you would like your name to appear on the ballot

Doug Rothrock

Candidate Residence/Route Address

Street Address

28058 Hwy 730

City

Umatilla

State

OR

Zip

97882

Candidate Mailing Address and Contact Information

Street Address or PO Box

28058 Hwy 730

City

Umatilla

State

OR

Zip

97882

Work Phone

Home Phone

Cell Phone

509-386-4589

Fax

Email Address

powerstroker1@yahoo.com

Web Site, if applicable

Race and Ethnicity *Optional*

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

NA / Retired

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

Diesel injection systems technician, Farmer, Walla Walla Valley Academy school board.

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Walla Walla Valley Academy	12	Diploma	General
WVW Community College	2 yr	Degree	Computer sys., Networking
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)

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3/12/23
Date Signed

MAR 08 2023

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Office Information

Filing for Office of: *Director Position #3*

District, Position or County: *Umatilla Hospital District #1*

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Jack

MI

Last

McWhinnie

Suffix

How you would like your name to appear on the ballot

JACK McWHINNIE

Candidate Residence/Route Address

Street Address

28052 Hwy 730

City

UMATILLA

State

OR

Zip

97882

Candidate Mailing Address and Contact Information

Street Address or PO Box

28052 Hwy 730

City

UMATILLA

State

OR

Zip

97882

Work Phone

Home Phone

541-922-4673

Cell Phone

Fax

Email Address

Web Site, if applicable

Race and Ethnicity *Optional*

White

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

Retired

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

1) Been on the Board since 2012

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
East Providence High in R.I.	12 YEAR		
Asbestos Worker Loc 6 Boston, MA	4 year Apprenticeship	Union Insulator	

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.

Massachusetts (Seabrook) Board of Registrars appointed
Umatilla County West End Trash Committee appointed
City of Umatilla Code Enforcement Committee appointed
Umatilla Hospital district director since 2012 elected

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3/4/23
Date Signed