

Candidate Filing
District

SEL 190

rev 01/16
ORS 255.235

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

This filing is an

Original

Amendment

Office Information

Filing for Office of:

Position 3

District, Position or County:

Corv. Rural Fire Prot. District

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Phillip

MI

-

Last

Sollins

Suffix

Title

How you would like your name to appear on the ballot

Phillip Sollins

Candidate Residence/Route Address

Street Address

7100 NW Somerset Dr.

City

Corvallis

State

OR

Zip

97330

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

Street Address or PO Box

Box R

City

Corvallis

State

Zip

97330

Work Phone

541-231-2767

Home Phone

-

Cell Phone

-

Fax

-

Email Address

phil.sollins@orst.edu

Web Site, if applicable

-

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.

Professor
Oregon State Univ

FILED

FEB 11 2011

time

11:35

AM/PM

signature

[Signature]

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
Swarthmore College		B.A.	Biology
Univ. North Carolina		M.A.	Zoology
Univ. Tennessee		Ph.D.	Botany

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.

None

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's Signature

2/11/19

Date Signed

FILED

FEB 11 2019

time: 11:35 AM
signature: [Signature]

For Office Use Only Initials _____