

**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: Director **POSITION # 4**

District, Position or County: Corvallis Rural Fire Protection District

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Robert	A.	Conder		

How you would like your name to appear on the ballot

Bob Conder

Candidate Residence/Route Address

Street Address	City	State	Zip
2601 NW Michelle Drive	Corvallis	Or	97330

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

Street Address or PO Box	City	State	Zip
2601 NW Michelle Drive	Corvallis	Or	97330

Work Phone	Home Phone	Cell Phone	Fax
		541-602-0217	

Email Address	Web Site, if applicable
BobConder@aol.com	

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

Chairman of the Board of Directors of the CRFPD

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

Have been a board member for 18 years and Chairman for the last 9.

FILED

MAR 05 2019

Continued on the reverse side of this form

Time: 2:15 AM/PM
Deputy:

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
University of Utah	Bachelor's Degree	BSEE	Electronic Engineering

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.

Chairman of the Board of Directors of the Madrone Estates Water Association

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)

March 4, 2019

Candidate's Signature _____

Date Signed

FILED
 05
 MAR 04 2019

For Office Use Only Initials _____

Time: 2:15 AM/PM
 Deputy: 