

**Candidate Filing
District**

SEL 190

rev 02/25
ORS 255.235

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

2025 District Election Filing Dates

Candidate Filing February 8, 2025 to March 20, 2025

Withdrawal Date March 20, 2025

This filing is an

Original

Amendment

Office Information

Filing for Office of: **Parkdale Sanitary District Board**

District, Position or County: **PARKdale Sanitary District**

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

William

MI

B

Last

Connors

How you would like your name to appear on the ballot

Brian Connors

Candidate Residence/Route Address

Street Address

4877 Mc Isaac Dr

City

Parkdale

State

OR

Zip

97041

Candidate Mailing Address and Contact Information Do not use an address that has been exempt from disclosure.

Street Address or PO Box

P O Box 517

City

Parkdale

State

OR

Zip

97041

Work Phone

Home Phone

Cell Phone

541 968 5925

Email Address

wbrianconnors@gmail.com

Web Site, if applicable

Race and Ethnicity *Optional*

na

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.

natural resource specialist

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
Cal Poly SLO	16	BS	Natural Resources

Educational Background (other) Attach a separate sheet if necessary.

N/A

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Parkdale Sanitary District

Campaign Finance Information

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 \$1,500 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.

Residence Address Exemption

To exempt your residence address from public disclosure, complete form SEL 180 – Residence Address Exemption Request. The request for a Residence Address Exemption MUST include a publicly disclosable mailing address. See the Candidates Manual for further information.

I don't want my residence address to be disclosed. I will be filing a separate SEL 180 – Residence Address Exemption Request.

Candidate Attestation

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. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)


Candidate's Signature

HOOD RIVER COUNTY
RECORDS & ASSESSMENT

3-18-25
Date Signed

2025 MAR 18 AM 11:39

FILED