

# Candidate Filing Write-In Acceptance Form

**SEL 141**

rev 06/23  
ORS 254.548

## Write-In Acceptance Deadlines

<b>Primary Election</b> July 3, 2024	<b>General Election</b> December 18, 2024	<b>District Election</b> July 2, 2025
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## Filing Information

<b>This filing is for a(n)</b>	<input type="checkbox"/> Nomination	<input type="checkbox"/> Election
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## Office Information

Filing for Office of:	District, Position, County or City, if applicable:
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## Candidate Information

### Name of Candidate


First	MI	Last	Suffix
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## Nomination Information

Which political party's nomination are you accepting with this filing (if any)?	
<input type="checkbox"/> Democratic Party	<input type="checkbox"/> Republican Party

## Ballot Order

<input type="checkbox"/> Default Order	Party of which candidate is a member followed by no more than two additional parties listed in alphabetical order.		
<input type="checkbox"/> Specified Order	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>

 If you have previously filed an SEL 101 or electronic candidacy filing with the filing officer for this election cycle, skip to the Candidate Attestation on the second page of this form

## Candidate Information Cont.

### How you would like your name to appear on the ballot

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### Candidate Residence/Route Address

Street Address	City	State	Zip
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### Candidate Mailing Address and Contact information

Street Address or PO Box	City	State	Zip
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Work Phone	Home Phone	Cell Phone	Fax
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Email Address	Web Site, if applicable
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### Race and Ethnicity Optional

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*Continued on page 2 of this form*

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

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

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**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

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

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

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**Candidate Attestation**

By signing this document, I hereby state that:

- all information provided by me on this form is true to the best of my knowledge
- I accept the nomination for the office indicated above and I will qualify for said office if elected
- or**
- I accept the office indicated above and qualify for said office
- and, if applicable,**
- I further state that all information provided by me on my previously submitted candidacy filing(s) is true and correct and I understand it will be used for my filing as a write-in candidate.

 **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).

_____ <b>Candidate Signature</b>	_____ <b>Date</b>
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