

Candidate Filing

Write-In Acceptance Form

SEL 141

rev 05/18
ORS 254.548

Write-In Acceptance Deadlines

Primary Election

June 25, 2018

General Election

December 17, 2018

District Election

July 1, 2019

Filing Information

This filing is for a(n)

Nomination

Election

Filing Officer

Secretary of State

County Elections Official

City Recorder (Auditor)

Office Information

Filing for Office of:

District, Position, County or City, if applicable:

Candidate Information

Name of Candidate

First

MI

Last

Suffix

Title

Nomination Information

Which political party's nomination are you accepting with this filing (if any)?

Democratic Party

Independent Party

Republican Party

Ballot Order

Default Order

Party of which candidate is a member followed by no more than two additional parties listed in alphabetical order.

Specified Order

1st

2nd

3rd



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 back of this form

Candidate Information Cont.

How you would like your name to appear on the ballot

Candidate Residence/Route Address

Street Address

City

State

Zip

Candidate Mailing Address and Contact information

Street Address or PO Box

City

State

Zip

Work Phone

Home Phone

Cell Phone

Fax

Email Address

Web Site, if applicable

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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 (no acronyms)	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).

_____	_____
Candidate Signature	Date