

City Candidates

2018 General (November) Election City Candidate Information

First day to File: May 30, 2018

Last day to File: August 28, 2018

All forms must be filed with your city election office. A candidate seeking office can file one of two ways, by paying a fee, or by petition.

File by Fee

A candidate will file both of the following with the city elections office:

- Candidate Filing – Major Political Party or Nonpartisan form ([SEL 101](#))
- The appropriate filing fee (check with your city election office for filing fees)

File by Petition

A candidate must allow sufficient time to have signatures verified before the filing deadline.

The following forms must be completed and filed with the city elections office:

- Candidate Filing – Major Political Party or Nonpartisan form ([SEL 101](#)) marked “Prospective Petition”
- Candidate Signature Sheet - Nonpartisan ([SEL 121](#))
- Petition Submission ([SEL 338](#)), form must be completed and filed with each submittal of signatures.

Signature Verification

- The city elections official will review signature sheets for sufficient circulator certification.
- The city elections official will submit the signatures to the county elections official for signature verification.
- The county elections official will:
verify the original signatures against the voters’ current registration record
And
return the certified signature sheets to the city elections official.

- The city elections official will notify the candidate of the results of the signature verification. If it is determined that there are not enough valid signatures and the filing deadline has not passed, the candidate may submit additional signatures.

Ballot

The city elections official will send the county elections office a list of candidates that are qualified for vote. The county elections official will put those names on the General (November) election ballot. This will not be in the Voters' Pamphlet, only on the ballot.

Cities in Klamath County

- City of Klamath Falls
500 Klamath Avenue
541-883-5316
- City of Chiloquin
228 First Street
541-783-2717
- City of Malin
2307 Third Street
541-723-2021
- City of Merrill
300 E 1st Street
541-798-5808
- City of Bonanza
2900 4th Avenue
541-545-656
-

Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 01/18
ORS 249.031

Filing Dates		Candidate Filing	State Voters' Pamphlet	Candidate Withdrawal
Primary Election May 15, 2018	First Day to File Last Day to File	September 7, 2017 March 06, 2018	January 15, 2018 March 8, 2018	March 9, 2018
General Election November 6, 2018	First Day to File Last Day to File	May 30, 2018 August 28, 2018	July 9, 2018 August 28, 2018	August 31, 2018

Filing Information			
This filing is an	<input type="checkbox"/> Original	<input type="checkbox"/> Amendment	
Filing Officer	<input type="checkbox"/> Secretary of State	<input type="checkbox"/> County Elections Official	<input type="checkbox"/> City Recorder (Auditor)

Office Information			
Filing for Office of:			
District, Position or County:			
Party Affiliation:	<input type="checkbox"/> Democratic Party	<input type="checkbox"/> Republican Party	<input type="checkbox"/> Independent Party <input type="checkbox"/> Nonpartisan
Incumbent Judge (for judicial candidates only):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Nondisclosure on file

Filing Method			
<input type="checkbox"/> Fee			
Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Senator	\$150	MSD Executive Officer, MAD Director	\$100
United States Representative	\$100	MSD Councilor	\$25
Statewide Offices	\$100	County Office	\$50
State senator or Representative	\$25	City Office	Set by charter or ordinance
Circuit Court Judge	\$50	Justice of the Peace	n/a
<input type="checkbox"/> Prospective Petition, in lieu of filing fee		Some circulators may be paid	<input type="checkbox"/> Yes <input type="checkbox"/> No

Candidate Information				
Name of Candidate				
First	MI	Last	Suffix	Title
How you would like your name to appear on the ballot				
Candidate Residence / Route Address				
Street Address	City	State	Zip	County
Candidate Mailing Address and Contact Information Only one phone number is required.				
Street Address or PO Box	City	State	Zip	
Work Phone	Home Phone	Cell Phone	Fax	
Email Address	Web Site, if applicable			

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

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

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.

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

Campaign Finance Information Not applicable to candidates for federal office.

Candidate Committee This section should not be amended at a later date.

Yes, I have a candidate committee.

No, I do not expect to spend or receive more than \$750 during each calendar year. The \$750 includes personal funds spent for any campaign-related costs, such as the candidate filing fee; however state voters' pamphlet filing fees are not included when calculating contribution or expenditure totals. 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.

NOTE: If you have previously filed for office please check with the Elections Division to verify if you have an existing candidate committee.

No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

Candidate Attestation

By signing this document, I hereby state that:

- I will accept the nomination for the office indicated above;
- I will qualify for said office if elected;
- All information provided by me on this form is true to the best of my knowledge; *and*
- No circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

For Major Political Party Candidates

- if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031). Does not apply to candidates filing for the office of US President.

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 or not more than one precinct committee person 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 Signature

Date

Candidate Signature Sheet | Nonpartisan

Petition ID _____

Signatures for this petition are being gathered by PAID Circulators VOLUNTEER Circulators
This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.
i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer.
Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County _____

Candidate Information	
Name	Office
Election	District or Position Number

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed	mm/dd/yy	Print Name	Residence or Mailing Address	street, city, zip code
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet once the certification has been signed and dated!
I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Circulator Signature	Date Signed	mm/dd/yy	Sheet Number
			Sheet will be numbered by group submitting the petition.

Printed Name of Circulator _____
County Elections Officials provide a separate certification to attach to the petition.

Petition Submission

Candidate, Voters' Pamphlet

SEL 338

rev. 01/18
OAR 165-010-0005, 165-016-0000

→ This form must be completed and filed with any submission of signatures.

Filing Officer		
<input type="checkbox"/> State	<input type="checkbox"/> County For both county and district petitions.	<input type="checkbox"/> City

Election Type		Year			
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Special Election	<input type="checkbox"/> 2018	<input type="checkbox"/> 2019	<input type="checkbox"/> 2020

Petition Information	
Number	Type <input type="checkbox"/> Candidate Nominating <input type="checkbox"/> Voters' Pamphlet, Candidate <input type="checkbox"/> Voters' Pamphlet, Measure

Type of Filing	Number of Signatures Submitted
<input type="checkbox"/> Candidate Nominating	
<input type="checkbox"/> Voters' Pamphlet, Candidate	
<input type="checkbox"/> Voters' Pamphlet, Measure	

Candidate
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name	Contact Phone	Email Address
Signature	Date Signed	

Measure Argument Filer
→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name	Contact Phone	Email Address
Signature	Date Signed	

For office use only	
Submittal number	Number of signatures accepted
Is the petition complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be additional submittals? <input type="checkbox"/> Yes <input type="checkbox"/> No