# District Candidate Filing

**FEB 21 2013**

**SEL 190**

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1. This information is a matter of public record and may be published or reproduced. [X] Original  O Amendment

## Candidate Information

<table>
<thead>
<tr>
<th>Candidate Legal Name*</th>
<th>Candidate Name (As it should appear on ballot)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROBERT F. MEST</td>
<td>BC B. MEST</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Filing for Office of*</th>
<th>District and/or position (if applicable)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIRECTOR</td>
<td>BATTLE MEMORIAL PARK DISTRICT POS. 3</td>
</tr>
</tbody>
</table>

## Residence Address, Street/Route

3740 LA MARINA WAY

<table>
<thead>
<tr>
<th>City*</th>
<th>State*</th>
<th>Zip*</th>
<th>County of Residence*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Klamath Falls</td>
<td>OR</td>
<td>97663</td>
<td>Klamath</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Work Phone</th>
<th>Cell Phone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>541 882 2432</td>
<td>541 882 0364</td>
<td>541 892 0466</td>
<td>541 882 2646</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email Address*</th>
<th>Date of Election*</th>
</tr>
</thead>
<tbody>
<tr>
<td>MESTIE.W AOL.COM</td>
<td>11/01/21</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address (where all correspondence will be sent) Street/Route*</th>
</tr>
</thead>
<tbody>
<tr>
<td>541 882 2432</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City*</th>
<th>State*</th>
<th>Zip*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Indicates a required field. At least one phone number is also required.

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### Required Information

Filing with the required $10.00 fee.

**O** Filing by petition with the required signature sheets.

### Occupation

**Occupation present employment – paid or unpaid (required)**

POWELL PLUMBING 1981-1982 PAID 24 YEARS

**Occupational Background previous employment – paid or unpaid (required)**

POWELL PLUMBING 1985 TO PRESENT

SELF 1982-1985

DIANA CHAVEZ 1976-1982

### Educational Background

Schools attended, use attachment if needed (required)

**Complete Name of School (no acronyms)**  **Last Grade Level Completed**  **Diploma/Degree/Certificate** (AA, BA, BS, MA, PhD, etc)  **Course of Study** (optional)

<table>
<thead>
<tr>
<th>School</th>
<th>Last Grade</th>
<th>Diploma/Degree/Cert.</th>
<th>Course of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Univ Oregon</td>
<td>SR</td>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>Klamath Junior</td>
<td>High School</td>
<td>1967</td>
<td></td>
</tr>
</tbody>
</table>

*Other:*
Prior Governmental Experience elected or appointed (required)

WJADD memorial park 1994 to present  DIRECTOR
WJADD memorial park 1988 - 1994 BUDGET comm. the
SIOUXSI CHEL light district 1976 to present  DIRECTOR

By signing this document, I hereby certify that:
→ I will qualify for said office if elected
→ All information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge

Check the applicable box (not applicable to candidates for federal office - US Senate and US Representative):
☑ By marking this box, I certify I do not have an existing candidate committee and 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 2012 Campaign Finance Manual.
☐ By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the 2012 Campaign Finance Manual.

Candidate's Signature: [Signature]
Date Signed: 2/21/13
This information is a matter of public record and may be published or reproduced.  • Original  ○ Amendment

Candidate Legal Name*  
Dennis Ray Ward

Candidate Name (As it should appear on ballot)*  
Dennis R. Ward

Filing for Office of*  
Board member

District and/or position (if applicable)*  
Ward Memorial Park District #2

Residence Address, Street/Route*  
5245 Sturdivant Ave

City*  
Klamath Falls  97603  Klamath

State*  
Oregon

Zip*  
97603

County of Residence*  
Klamath

Home Phone  
541-884-0803

Work Phone  
Cell Phone  
Fax  
541-891-3549

Date of Election*  
5-21-13

Mailing Address (where all correspondence will be sent) Street/Route*  
5245 Sturdivant Ave

City*  
Klamath Falls  97603

State*  
Oregon

Zip*  
97603

* Indicates a required field. At least one phone number is also required.

Filing Information
• Filing with the required $10.00 fee.
• Filing by petition with the required signature sheets.

Occupation Information (include years and number of jobs)*

Occupation present employment – paid or unpaid (required)

D. Lock shop

Occupational Background previous employment – paid or unpaid (required)

Mayfield Oil

Western Environmental

D. Lock shop 11 years

Educational Background schools attended, use attachment if needed (required)

Complete Name of School (no acronyms)  
Shulden High School

Last Grade Level  
12

Diploma/Degree/Certificate  
(Open-ended)

Course of Study  
optional

Other:
By signing this document, I hereby certify that:

- I will qualify for said office if elected.
- All information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge.

Check the applicable box (not applicable to candidates for federal office - US Senate and US Representative):

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Candidate's Signature: [Signature]  
Date Signed: 2-22-13