**Filing of Candidacy for Special District Nomination**

**Candidate Name**
Leda Hunter

**Filing for Office of**
Director, Position 1

**District, Position or Zone Number if applicable**
Bly Rural Fire Protection District

**Residence Address, Street/Route**
61213 Moka's Ct.

**City**
Bly

**State**
OR

**Zip Code**
97622

**County of Residence**
Klamath

**Home Phone**
541-353-2335

**Work Phone**
N/A

**Fax**
N/A

**Email Address**
Ledawayne@cs.com

**Date of Election**
5-17-11

**Mailing Address**
PO Box 483
Bly

**City**
Bly

**State**
OR

**Zip Code**
97622

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- **Occupation**
  - Present employment: Retired
  - Previous employment: U.S.D.A. Forest Service paid

- **Educational Background**
  - Schools attended: Bly
  - Last Grade Level Completed: 12
  - Diploma/Degree/Certificate: N/A

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*continued on the reverse side of this form*
Prior Governmental Experience elected or appointed

Elected to Board of Directors for By RFPD 1992 to Present

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By signing this document, I hereby state:

- that I will qualify for said office if elected;
- that 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:

☐ By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than $350 or receive more than $350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed $350 during a calendar year, I must follow the requirements detailed in the 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 Campaign Finance Manual.

Candidate's Signature: [Signature]

Date Signed: 2/10/11

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Filing of Candidacy for Special District Nomination

Candidate Name: MELVIN LEROY WISON

Filing for Office of: DIRECTOR Position 2

How Name Should Appear on Ballot: MELVIN WISON

District, Position or Zone Number if applicable: FIRE RURAL FIRE BOARD, Position 2

Residence Address, Street/Route: 19130 SMITH ST.

City: KLY State: OR Zip Code: 97622 County of Residence: KLAMATH

Home Phone: 541-261-5726 Work Phone: 541-357-2622 Cellular Phone: 541-261-5726

Fax: 541-357-2622 Email Address: pastormel@juno.com Date of Election: MAY 17

Mailing Address where all correspondence will be sent, Street/Route: P.O. BOX 14

City: KLY State: OR Zip Code: 97622

Filing of candidacy by declaration, with the required $10.00 fee.

Filing of candidacy by petition, with the required signature sheets bearing the signatures of at least 25 electors or at least 10% of the electors residing in the electoral district for the office (whichever is less), certified by the appropriate county elections officials.

Occupation present employment – paid or unpaid: PASTOR

Occupational Background previous employment – paid or unpaid: PASTOR, MILITARY paid

Educational Background schools attended, use attachment if needed:

Complete Name of School no acronym: SIMPSON BIBLE COLLEGE Last Grade Level Completed: GRADUATE Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc): BA Course of Study: MINISTRY

Other: 

continued on the reverse side of this form.
Prior Governmental Experience elected or appointed

APPOINTED TO BOARD

By signing this document, I hereby state:

- that I will qualify for said office if elected
- that 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:

☑ By marking this box, I certify I do not have an existing candidate's committee and I do not expect to spend more than $350 or receive more than $350 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed $350 during a calendar year, I must follow the requirements detailed in the 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 Campaign Finance Manual.

Candidate’s Signature: [Signature]

Date Signed: 1-19-11

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