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FEB 19 2009

please type or print legibly in black ink

<table>
<thead>
<tr>
<th>candidate name</th>
<th>Michael E. Bureau</th>
</tr>
</thead>
<tbody>
<tr>
<td>filing for office of</td>
<td>Michael Bureau, Chiloquin/Agave/Lake Rural Fire Protection Dist., Position #4</td>
</tr>
<tr>
<td>how name should appear on ballot</td>
<td>Chiloquin, OR 97624</td>
</tr>
<tr>
<td>residence address</td>
<td>24338 Modoc Point Rd.</td>
</tr>
<tr>
<td>county of residence</td>
<td>Klamath</td>
</tr>
<tr>
<td>fax email address</td>
<td><a href="mailto:bureau97624@yahoo.com">bureau97624@yahoo.com</a></td>
</tr>
<tr>
<td>home phone</td>
<td>541-783-2734 or 541-891-3989</td>
</tr>
<tr>
<td>mailing address</td>
<td>P.O. Box 357 Chiloquin, OR 97624</td>
</tr>
</tbody>
</table>

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

Occupation and present employment, paid or unpaid

Retired

Educational background: schools attended, use attachment if needed

Other
required information (If no relevant information, list "None")

↓ prior governmental experience elected or appointed

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 $300 or receive more than $300 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed $300 during a calendar year, I must follow the requirements detailed in the 2008 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 2008 Campaign Finance Manual.

Michael J. Brown
Candidate Signature

2-18-09
Date Signed

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⚠ 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) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013).

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Initials

Receipt Number

Cash or Check Number

Candidate ID Number

Office Number
Please type or print legibly in black ink

Candidate Name: Brandon Fowler

Chiloquin Agency Lake Rural Fire Protection District

Residence Address:
9114 Speague River Rd., Chiloquin, OR 97624

County of Residence:
Klamath

Position:
Position 2

Home Phone:
541-740-9481

Work Phone:
541-205-4454

Fax:
888-291-9498

Email Address:
Brandon@seagles.com

Mailing Address:
P.O. Box 989, Chiloquin, OR 97624

 Required Information (if no relevant information, list "None")

Occupation:
Network Manager

Previous Employment:
AT&T

Education:
Eugene High School 12 - Diploma General

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.

Continued on the reverse side of this form
required information (if no relevant information, list “None”)  

prior governmental experience elected or appointed

APPOINTED TO THE BUDGET COMMITTEE OF THE CHILDREN AGENCY CARE RURAL FIRE PROTECTION DISTRICT IN 2000 TO PRESENT.

By signing this document, I hereby state:
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candidate’s signature

2/9/09 date signed

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Filing of Candidacy for Special District Nomination

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John Paul Rademacher

Chiloquin-Agency Lake Rural Fire Protection District

Position #5

420 East Day School Rd., Chiloquin OR 97624

Klamath Co

(541) 783-2687 (541) 891-4839

(541) 783-2687 haserad@gotsky.com May 19, 2009

420 E. Day School Rd., Chiloquin OR 97624

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.

required information (if no relevant information, list "None")

occupation present employment paid or unpaid

Retired

Klamath County School District
Chiloquin teacher, administrator

educational background schools attended, use attachment if needed

Hartford Public Schools 1970 diploma
Michigan State University 1975 BS teaching
Southern Oregon State 1981 Masters in teaching
Portland State University 1990 Administrative Certified

continued on the reverse side of this form
required information (if no relevant information, list “None”)  
1. prior governmental experience: elected or appointed

I am currently a Klamath County School District Board of Trustee member - elected in 2007

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:
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[Signature]

Feb 1st, 2009

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[Signature]

[Receipt number]

[Office number]
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candidate name

Ms. A. Zimmer

filing for office of

Chairwoman, District 5

how name should appear on ballot
district, position or zone number if applicable

residence address

s. 123 4th Ave. N. 4321

county of residence
city

home phone

work phone

fax

email address

Date of election

mailing address where all correspondence will be sent:

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.

required information (If no relevant information, list "None")

occupation present employment - paid or unpaid

occupational background previous employment - paid or unpaid

educational background schools attended, use attachment if needed

continued on the reverse side of this form
required information (if no relevant information, list “None”)

prior governmental experience, elected or appointed

By signing this document, I hereby state:

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[Signature]

[Date]

candidate’s signature

date signed

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[Initials]

[Cash or check number]

candidate id number

[Receipt number]

[Office number]