

Candidate Filing
District

SEL 190

rev 01/14
 ORS 255.235

i All information must be completed or the form will be rejected.

This filing is an

Original

Amendment

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Allan	M	Whitaker	III	Mr.

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Al	M	Whitaker	

Candidate Residence/Route Address

Street Address	City	State	Zip
14001 NW Orchard View Rd.	McMinnville	OR	97128

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
14001 NW Orchard View Rd.	McMinnville	OR	97128

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
		(503) 560-3488	
Email Address		Web Site, if applicable	
al@amwhitakerco.com			

Filing Information

<input checked="" type="checkbox"/> Filing with the required \$10.00 fee
<input type="checkbox"/> Prospective Petition

Office Information

Filing for Office of: McMinnville District School Board Member
District, Position or County: Position 4

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

Area Life Consultant, A.M. Whitaker Co.

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

Work within a family owned business brokering and wholesaling life insurance products throughout the Greater Northwest.

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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
Willamette University, Salem, Oregon	Graduated '81	Bachelor of Science	Economics

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.

NA

Campaign Finance Information (not applicable to candidates for federal office)

Candidate Committee

Yes, I have a candidate committee.

No, 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 Campaign Finance Manual.

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

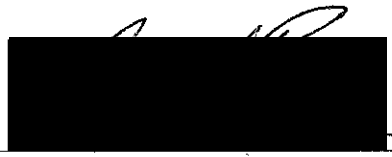
By signing this document, I hereby state that:

- I will qualify for said office if elected
- all information provided by me on this form is true to the best of my knowledge



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 at the same election. (ORS 249.013 and ORS 249.170)



3/19/15

Candidate's Signature

Date Signed

For Office Use Only Initials _____

CC Approval Code/Receipt Number _____