

Candidate Filing
Major Political Party or Nonpartisan

Received 8/22/16
Elsa Olson
SEL 101
rev 09/15
ORS 249.031

| Filing Dates | Candidate Filing | State Voters' Pamphlet | Candidate Withdrawal |
|------------------------------------------|--------------------|-------------------------------------------|----------------------|
| Primary Election May 17, 2016 | | Filed electronically using ORESTAR | |
| First Day to File | September 10, 2015 | January 18, 2016 | |
| Last Day to File | March 08, 2016 | March 10, 2016 | March 11, 2016 |
| General Election November 8, 2016 | | | |
| First Day to File | June 1, 2016 | July 11, 2016 | |
| Last Day to File | August 30, 2016 | August 30, 2016 | September 2, 2016 |

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

This filing is an Original Amendment

Filing Officer

Secretary of State County Elections Official City Recorder (Auditor)

Office Information

Filing for Office of: City Council Ward 2

District, Position or County: Ward 2

Party Affiliation: Democratic Party Republican Party Independent Party Nonpartisan

Incumbent Judge: Yes No Nondisclosure on file

Paying by Declaration or Petition:

Declaration, with the required 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 |

Prospective Petition Petition circulators will be paid Yes No

Candidate Information

Name of Candidate

First Kendall MI K Last Bell Suffix Title

How you would like your name to appear on the ballot

Kendall Bell

Candidate Residence/Route Address

Street Address 945 Loma Linda Dr City Klamath Falls State OR Zip 97601 County Klamath

Candidate Mailing Address

Street Address or PO Box 945 Loma Linda Dr City Klamath Falls State OR Zip 97601

Contact Information: Only one phone number is required.

| | | | |
|------------|----------------------------|----------------------------|-----------|
| Work Phone | Home Phone 541-883-2218 | Cell Phone 541-591-0024 | Fax NA |
|------------|----------------------------|----------------------------|-----------|

| | |
|-------------------------------------------|-------------------------------|
| Email Address Kendallbell945@gmail.com | Web Site, if applicable NA |
|-------------------------------------------|-------------------------------|

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

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.
Registered Nurse - Skylakes Hospital 1993 - 1998
Registered Nurse - Swedish Hospital (Ballard) 1984 - 1992 (Seattle WA)

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 |
|---------------------------------------|----------------------|----------------------------|-----------------|
| Canby High School - Canby, OR | 12 | Diploma - HS | |
| University of Portland | 4 yr Bachelor's | Registered Nurse (BSN) | Nursing |
| | | | |

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 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)

Kendall Bell

8/22/16

Candidate's Signature

Date Signed

**AFFIDAVIT OF NOMINATION
FOR THE OFFICE OF MAYOR/COUNCIL (select one)
OF KLAMATH FALLS, OREGON**

I, Kendall Bell, have been a resident of the City of Klamath Falls, Oregon, for more than four (4) years immediately prior to the election to be held in said City on the November 8, 2016, and being qualified to vote in said election, and qualified to hold the office I seek, do hereby declare myself a candidate for the office of:

Mayor _____
Council ✓ **Ward** II (2)

of the City of Klamath Falls, Oregon, which said office is to be filled by the electors at said election, and I tender herewith the required filing fee of:

Mayor \$50.00 _____
Council \$25.00 ✓

and request my name be entered upon the ballot for said office. My true name and address are as follows:

Name: Kendall Bell
(Please print)

Street Address: 945 Loma Linda Dr
Klamath Falls OR 976 01

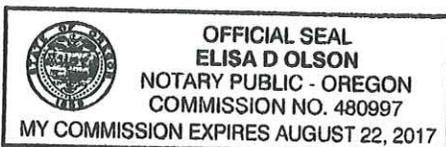
STATE OF OREGON)
COUNTY OF KLAMATH) ss.
CITY OF KLAMATH FALLS)

I, Kendall Bell, being the above-named candidate for the office of Mayor _____ or Council for Ward ✓, of the City of Klamath Falls, Oregon, having first been duly sworn, upon oath, say that the facts stated in the foregoing declaration of candidacy are true and correct.

Dated this 22 day of August, 2016.

Kendall Bell

SUBSCRIBED AND SWORN to before me this 22 day of August, 2016.



Elisa D Olson
NOTARY PUBLIC FOR OREGON
My Commission Expires: 8-22-2017