

# Filing of Candidacy for Special District Nomination

FEB 10 2011

SEL 190

rev 01/10: ORS 255.235

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Candidate Name <b>Kathy Longoria</b>		Filing for Office of <b>Board Member</b>	
How Name Should Appear on Ballot <b>Kathy Longoria</b>		District, Position or Zone Number if applicable <b>Klamath County Fire Dist #5 Position 3</b>	
Residence Address, Street/Route <b>PO Box 14</b>			
City <b>Bonanza</b>	State <b>OR</b>	Zip Code <b>97623</b>	County of Residence <b>Klamath</b>
Home Phone <b>541-545-1404</b>	Work Phone	Cellular Phone	
Fax <b>541-545-1404</b>	Email Address <b>darryl003@centurytel.net</b>	Date of Election <b>May 17, 2011</b>	
Mailing Address where all correspondence will be sent, Street/Route <b>PO Box 14</b>			
City <b>Bonanza</b>	State <b>OR</b>	Zip Code <b>97623</b>	

- 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  
**Klamath County Fire District #5**

Occupational Background previous employment - paid or unpaid  
**Own Business 2003-2007**  
**Klamath County 1997-2003**

Educational Background schools attended, use attachment if needed			
Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
<b>Livermore High School</b>	<b>12</b>	<b>Diploma</b>	<b>General</b>

Other: **Oregon State University**      **Certificate**      **Emergency Medical Technician**

continued on the reverse side of this form

SEL 190

REG

Prior Governmental Experience elected or appointed

Board of Director - elected for Klamath County Fire District #5

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

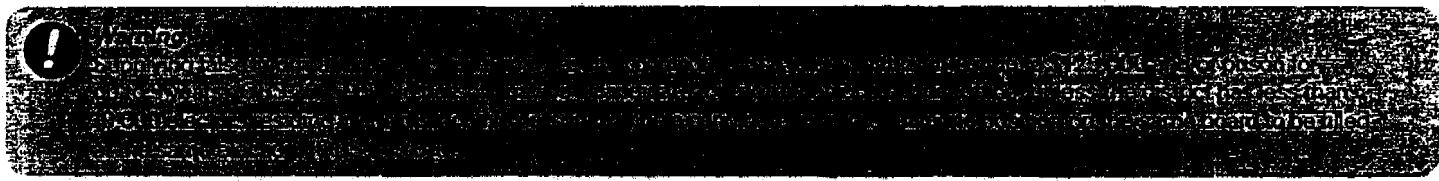
Check the applicable box:

- 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.

*Kathy Longaker*  
Candidate's Signature

02/05/2011  
Date Signed

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*DW*

OK #4869



48507

# Filing of Candidacy for Special District Nomination

SEL 190

REV 01/10: OHS 285,235

MAR 17 2011

→ This information is a matter of public record and may be published or reproduced.

Candidate Name <i>NORMAN L. STALBIRD</i>		Filing for Office of <i>Klamath County Fire District 5</i>	
How Name Should Appear on Ballot <i>NORMAN L. STALBIRD</i>		District, Position or Zone Number if applicable <i>POSITION #4</i>	
Residence Address, Street/Route <i>30111 Gold Finch Drive</i>			
City <i>BONANZA</i>	State <i>OR</i>	Zip Code <i>97623</i>	County of Residence <i>KLAMATH</i>
Home Phone <i>541-545-6884</i>	Work Phone <i>541-884-8872</i>	Cellular Phone <i>541-892-7837</i>	
Fax	Email Address <i>NSTALBIRD@CENTRETEL.NET</i>	Date of Election	
Mailing Address where all correspondence will be sent, Street/Route <i>30111 Gold Finch Drive</i>			
City <i>BONANZA</i>	State <i>OR</i>	Zip Code <i>97623</i>	
<input checked="" type="checkbox"/> Filing of candidacy by declaration, with the required \$10.00 fee. <input type="checkbox"/> 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 <i>SEASONAL ASPHALT TANKER DRIVER</i>			
Occupational Background previous employment - paid or unpaid			
Educational Background schools attended, use attachment if needed			
Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
<i>West High School - Columbus Ohio</i>	<i>12</i>		
<i>Old Dominion</i>	<i>13</i>	<i>U.S. NAVY</i>	<i>Continuing Education</i>
<i>Klamath Community College</i>			<i>Computers &amp; Welding</i>
Other:			

continued on the reverse side of this form

SEL 190

Prior Governmental Experience elected or appointed

President - Goldfinch Special Road District

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

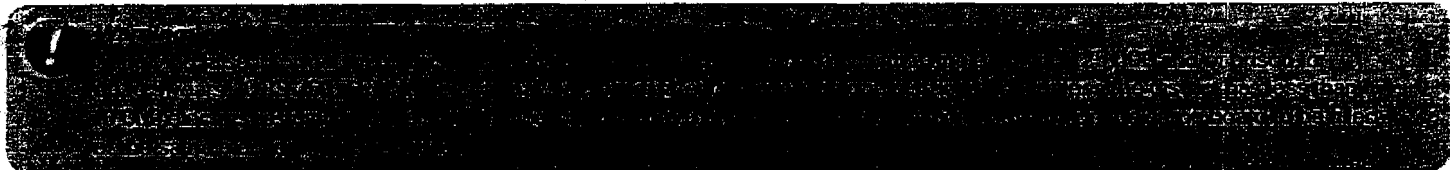
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- By marking this box, I certify that I have already filed or will soon file a Statement of Organization for Candidate Committee (SEL 220). For detailed instructions, see the Campaign Finance Manual.

*Norman Stalder*  
Candidate's Signature

3-17-11  
Date Signed

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*RL*

*Cash*



# Filing of Candidacy for Special District Nomination

SEL 190

rev 01/10: ORES 286.236

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**FEB 28 2011**

Candidate Name <b>Carol Carlin</b>		Filing for Office of <b>Board of Director</b>	
How Name Should Appear on Ballot <b>Carol Carlin</b>		District, Position or Zone Number if applicable <b>Klamath County Fire Dist #5, Position 4</b>	
Residence Address, Street/Route <b>8815 Ground Squirrel</b>			
City <b>Bonanza</b>	State <b>OR</b>	Zip Code <b>97623</b>	County of Residence <b>Klamath</b>
Home Phone <b>(541) 545-1400</b>	Work Phone	Cellular Phone	
Fax	Email Address	Date of Election	

Mailing Address where all correspondence will be sent, Street/Route <b>8815 Ground Squirrel</b>		
City <b>Bonanza</b>	State <b>OR</b>	Zip Code <b>97623</b>

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

**Teachers Aide (Spec. Ed. Paraprofessional)**

Occupational Background previous employment - paid or unpaid

**21 years as Special Ed. paraprofessional**

Educational Background schools attended, use attachment if needed

Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
<b>Covina High School</b>	<b>12th</b>		
<b>Mt. San Antonio College</b>	<b>2 1/2 yr</b>	<b>AA</b>	<b>Nursing</b>

Other:

continued on the reverse side of this form

SEL 190

**Prior Governmental Experience** elected or appointed

Past 4 years as Board of Director member for Klamath  
Fire Dist. #5.

**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

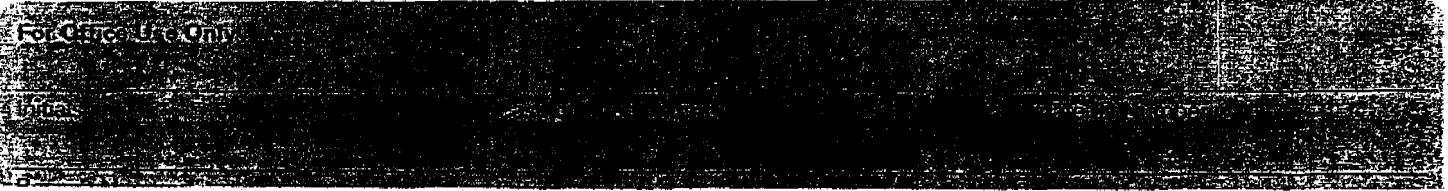
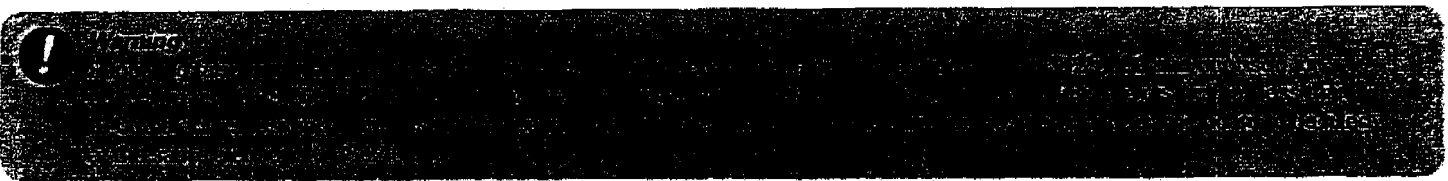
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Candidate's Signature

1-12-11  
Date Signed

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# Filing of Candidacy for Special District Nomination

SEL 190  
rev 01/10: ORS 256.236

MAR 01 2011

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Candidate Name <b>CAROL BERTHOLF</b>		Filing for Office of <b>BOARD OF DIRECTOR</b>	
How Name Should Appear on Ballot ✓ <b>CAROL BERTHOLF</b>		District, Position or Zone Number if applicable <b>KIAMATH CO. FIRE DIST #5 POSITION 5</b>	
Residence Address, Street/Route <b>5015 SWAN DR.</b>			
City <b>BONANZA</b>	State <b>OR.</b>	Zip Code <b>97623</b>	County of Residence <b>KIAMATH</b>
Home Phone <b>541-545-1323</b>	Work Phone	Cellular Phone	
Fax	Email Address	Date of Election <b>MAY 17, 2011</b>	
Mailing Address where all correspondence will be sent, Street/Route <b>5015 SWAN DR.</b>			
City <b>BONANZA</b>	State <b>OR.</b>	Zip Code <b>97623</b>	

- 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  
**RETIRED**

Occupational Background previous employment - paid or unpaid  
**ACCT CLK II  
MARTINEZ COUNTY HOSPITAL  
MARTINEZ, CAL.**

Educational Background schools attended, use attachment if needed

Complete Name of School no acronyms	Last Grade Level Completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc)	Course of Study optional
<b>NAPA Jr. HIGH</b>	<b>12<sup>th</sup></b>		<b>GENERAL</b>

Other:

Prior Governmental Experience elected or appointed

CURRENT MEMBER OF BOARDS OF DIRECTORS.

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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*Carol Berthoff*

Candidate's Signature

03-01-11

Date Signed

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Warning

For Office Use Only

Name

Date of Birth