

**Candidate Filing  
District**

**SEL 190**

rev 01/16  
ORS 255.235

MHR17 '21 942

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

This filing is an

Original

Amendment

**Office Information**

Filing for Office of:

District, Position or County:

Echo School District Position 7

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix	Title
Amy	A	Hendrix		

**How you would like your name to appear on the ballot**

Amy ~~Hendrix~~ Hendrix

**Candidate Residence/Route Address**

Street Address	City	State	Zip
30 S Prescott	Echo	OR	97826

**Candidate Mailing Address and Contact Information: Only one phone number is required.**

Street Address or PO Box	City	State	Zip
PO Box 262	Echo	OR	97826

Work Phone	Home Phone	Cell Phone	Fax
(458) 219-1293	541-720-1054	541-720-1054	

Email Address	Web Site, if applicable
amie-ann77@aol.com	

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

Early ~~Intervention~~ Intervention/Early Childhood Special Education Specialist  
EI/ECSE Specialist Intermountain ESD

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

Prior to joining IMESD, I was employed at Umatilla-Morrow Head Start for over 20 years. ~~the~~ Since 1999, I have worked in Early Childhood Education both directly in education and through social service/health related aspects. Health & Nutrition Director for Head Start WIC program for several years.

**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
University of Idaho	Bachelors	BS	Sociology/CJ

**Educational Background (other)** Attach a separate sheet if necessary.

Numerous Post BS work in ECE + Health Education; Worked in Early Childhood 20+ years

**Prior Governmental Experience (elected or appointed)** If no relevant experience, None or NA must be entered.

None

**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 / 16 / 21  
Date Signed

For Office Use Only Initials

IS 3672

**Candidate Filing**  
**District**

**SEL 190**  
rev 01/16  
ORS 255.235

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Amendment

**Office Information**

Filing for Office of:

Echo School Board

District, Position or County:

zone 4

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First

Heather

MI

M

Last

Madison

Suffix

Title

MRS

**How you would like your name to appear on the ballot**

Heather Madison

**Candidate Residence/Route Address**

Street Address

73700 Hwy 207

City

Echo

State

OR

Zip

97826

**Candidate Mailing Address and Contact Information: Only one phone number is required.**

Street Address or PO Box

73700 Hwy 207

City

Echo

State

OR

Zip

97826

Work Phone

Home Phone

Cell Phone

(541) 571-9069

Fax

Email Address

heather@madisonranches.com

Web Site, if applicable

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

Farmer/Rancher

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

None

**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
Eastern Oregon University	4	Bachelor Science	Health Science

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.**

~~None~~ School Board 2+ years

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

**Candidate Committee**

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March 18, 2021  
Date Signed

**Candidate Filing**  
**District**

**SEL 190**

rev 01/21  
ORS 255.235

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**i** This form must be filed with county elections official. All information must be completed or the form will be rejected.

**2021 District Election Filing Dates**

**Candidate Filing** February 6, 2021 to March 18, 2021

**Withdrawal Date** March 18, 2021

This filing is an

**Original**

**Amendment**

**Office Information**

Filing for Office of: **Direction Position 5**

District, Position or County: **Echo School District**

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix
Jennifer	A	Cox	

**How you would like your name to appear on the ballot**

**Jennifer Cox**

**Candidate Residence/Route Address**

Street Address	City	State	Zip
331 E Willow	Echo	OR	97826

**Candidate Mailing Address and Contact Information:** At least one phone number and email address is required.

Street Address or PO Box	City	State	Zip
PO BOX 211	Echo	OR	97826

Work Phone	Home Phone	Cell Phone	Fax
		541-720-1092	

Email Address	Web Site, if applicable
mrscoxey@yahoo.com	

**Race and Ethnicity** *Optional*

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

Assessment Coordinator (TOSA) Hermiston School District

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

**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

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.

Echo School Board member over 5 years

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

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

By signing this document, I hereby state that:

- I will qualify for said office if elected
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3-12-2021

Date Signed

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Candidate Filing  
District

SEL 190

rev 01/16  
ORS 255.235

FORM 21 1104

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

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Original

Amendment

Office Information

Filing for Office of: School Board Member

District, Position or County: Echo 5R, Position 1, Umatilla

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First	MI	Last	Suffix	Title
Nathan	L	James		

How you would like your name to appear on the ballot

Nate James

Candidate Residence/Route Address

Street Address	City	State	Zip
33783 Rieth Rd.	Echo	OR	97826

Candidate Mailing Address and Contact Information: Only one phone number is required.

Street Address or PO Box	City	State	Zip
P.O. box 151	Echo	OR	97826

Work Phone	Home Phone	Cell Phone	Fax
541-278-8049 ext.105	541-571-1696	( )	

Email Address	Web Site, if applicable
natejames0711@gmail.com	

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

District Conservationist with the USDA-NRCS

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

20 yrs with the Natural Resources Conservation Service a branch of the United States Department of Agriculture

**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
Echo High School	12	Diploma	general
EOU / OSU	4yr.	Bachelors Degree	crop/soil Science and Rangeland Resources

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.

None

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

**Candidate Committee**

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3/5/21

Date Signed

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