

# Candidate Filing District

SEL 190

rev 01/21  
ORS 255.235

MAR 21 9:11

**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: Milton Freewater Water Control District

District, Position or County: Position 4

## Filing Information

Filing with the required \$10.00 fee

Prospective Petition

## Candidate Information

### Name of Candidate

First  
Bradley

Mi  
J

Last  
Humbert

Suffix

How you would like your name to appear on the ballot

Brad Humbert

## Candidate Residence/Route Address

Street Address

1813 Oak Street

City

Milton Freewater

State

OR

Zip

97862

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

Street Address or PO Box

1813 Oak Street

City

Milton Freewater

State

OR

Zip

97862

Work Phone

509-301-1050

Home Phone

509-301-1050

Cell Phone

509-301-1050

Fax

Email Address

bradhumbert@yahoo.com

Web Site, if applicable

## Race and Ethnicity *Optional*

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

Self Employed

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

Construction Management

**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
McGloughlin Union High School		Diploma	
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.

MFWCD Bourd Member  
City of Milton Freewater City Council

**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
- 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)

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03/02/2021

Date Signed

DS # 3640

**Candidate Filing  
District**

**SEL 190**

rev 01/21  
ORS 255.235

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**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: **Water Control District**

District, Position or County: **Milton-Freewater Water Control, Director, Position 1- 2 yr term**

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix
Tamara	L	Sloan	

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

**Tami Sloan**

**Candidate Residence/Route Address**

Street Address	City	State	Zip
84907 Humbert Lane	Milton-Freewater	OR	97862

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

Street Address or PO Box	City	State	Zip
84907 Humbert Lane	Milton-Freewater	OR	97862

Work Phone	Home Phone	Cell Phone	Fax
509 897-2537	509 520-5471	509 520-5471	na

Email Address	Web Site, if applicable
tsloan@360wisp.net	

**Race and Ethnicity** *Optional*

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

Imaging Manager, Providence St. Mary Medical Center

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

na

**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
Oregon Institute of Technology	4 yr	Bachelor of Science	Radiology
McLoughlin Union High School	12	Diploma	

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)**

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Car

3/7/2021

Date Signed

IS #3641

**Candidate Filing  
District**

MAR 15 '21 3:48

**SEL 190**

rev 01/21  
ORS 255.235

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**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: **Milton-Freewater Water Control District**

District, Position or County: **Position 3**

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First  
**Thomas**

MI  
**R**

Last  
**Piefer**

Suffix

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

**Tom Piefer**

**Candidate Residence/Route Address**

Street Address

**84608 Eastside Road**

City

**Milton-Freewater**

State

**Or**

Zip

**97862**

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

Street Address or PO Box

**84608 Eastside Road**

City

**Milton-Freewater**

State

**Or**

Zip

**97862**

Work Phone

**509-200-1417**

Home Phone

Cell Phone

**509-200-1417**

Fax

Email Address

**piefert@charter.net**

Web Site, if applicable

**Race and Ethnicity** *Optional*

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

**Educator/Farmer**

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

**Milton-Freewater School District**

**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
Renton High School	12th	Yes	General Ed.
Central Washington University	4 years	Yes	Education
Walla Walla University	2	Yes	Counseling
Eastern Oregon University	2	Yes	ESL

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.

United States Air Force/Retired

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

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 (ORS 240.013 and ORS 240.170)

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03/11/2021

Date Signed

DS 3655

Candidate Filing  
District

599R

FEB 24 '21 11

SEL 190  
rev 01/16  
ORS 255.235

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

This filing is an  Original  Amendment

**Office Information**

Filing for Office of: Director, M-F Water Control Dist

District, Position or County: M-F District - Umatilla County Box 5

**Filing Information**

Filing with the required \$10.00 fee

Prospective Petition

**Candidate Information**

**Name of Candidate**

First	MI	Last	Suffix	Title
VERNON	R	RODIGHIERO		

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

VERNON R RODIGHIERO

**Candidate Residence/Route Address**

Street Address	City	State	Zip
83903 N. MAIN ST	MILTON-FREEWATER	OR	97862

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

Street Address or PO Box	City	State	Zip
PO BOX 226	MILTON-FREEWATER	OR	97862

Work Phone	Home Phone	Cell Phone	Fax
509 570 7061	509 670 7061	509 570 7061	NONE

Email Address	Web Site, if applicable
VERNON@HOTMAIL.COM	NONE

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

ORCHARDIST

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

ORCHARDIST 2001-PRESENT  
OFFICE MGR 79-2001  
USAF > 58-79

**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
St Josephs Academy - HS	12	Diploma	
UNIVERSITY OF TAMPA - FLORIDA	16	Diploma	Bus Admin

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.

WATER CONTROL DISTRICT - 96 TO PRESENT  
UR CEMETERY DIST - 2000 TO PRESENT

**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:

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C:

2/22/21

Date Signed

For Office Use Only Initials

DS #3615