SEL 190 rev 08/22 ORS 255.235

District

Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone  (541) 888-8893  (541) 404-0018  (541)	State Zip 97453
Filing for Office of: Coop County Area Transit  District, Position or County: Position 5.  Filing Information  Filing Information  Filing with the required \$10.00 fee  Prospective Petition  Candidate Information  Name of Candidate  First  Garrett  C  Sherrit  How you would like your name to appear on the ballot  Garrett  Candidate Residence/Route Address  Street Address  Street Address  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Cell Phone  541) 888-8893	end State Zip end SP- 97453
Filing Information  Filing with the required \$10.00 fee  Prospective Petition  Candidate Information  Name of Candidate  First  Garrett  Candidate  First  How you would like your name to appear on the ballot  Candidate Residence/Route Address  Street Address  Street Address  City  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Cell Phone  541)	end State Zip end SP- 97453
Filing Information  Filing with the required \$10.00 fee  Prospective Petition  Candidate Information  Name of Candidate  First  Garrett  Carrett  Carrett  Carrett  Candidate Residence/Route Address  Street Address  Street Address City  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Filing Information  Last  Cherrit  Last  Cherrit  Last  Cherrit  Last  Cherrit  Last  Cherrit  And Contact Information  City  City  City  Cell Phone  Syl) 888-8893	end State Zip end SP- 97453
Filing Information  Filing with the required \$10.00 fee  Prospective Petition  Candidate Information  Name of Candidate  First  Garrett  Carrett  Carrett  Carrett  Candidate Residence/Route Address  Street Address  Street Address City  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Filing Information  Last  Cherrit  Last  Cherrit  Last  Cherrit  Last  Cherrit  Last  Cherrit  And Contact Information  City  City  City  Cell Phone  Syl) 888-8893	end State Zip end SP- 97453
Candidate Information  Name of Candidate  First  Garrett  Candidate  First  MI  Last  Sherrit  How you would like your name to appear on the ballot  Candidate Residence/Route Address  Street Address  Street Address  City  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Cell Phone  541) 888-8893	end State Zip end SP- 97453
Candidate Information  Name of Candidate  First  Garrett  C  Sherrit  How you would like your name to appear on the ballot  Garrett  Sherrit  Candidate Residence/Route Address  Street Address  Street Address  City  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone  541) 888-8893  Cell Phone  541) 888-8893	end State Zip end SP- 97453
Name of Candidate  First  Garrett  C  Sherrit  How you would like your name to appear on the ballot  Garrett  Sherrit  Candidate Residence/Route Address  Street Address  Street Address  City  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Call Phone  541) 888-8893	end State Zip end SP- 97453
Name of Candidate  First Garrett C Sherrit  How you would like your name to appear on the ballot  Garrett Sherrit  Candidate Residence/Route Address  Street Address Street Address City 2965 Myrtle St. Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone 541) 888-8893  Cell Phone 541) 888-8893  Candidate Mailing Address Street Address Or PO Box  Cell Phone 541) 888-8893	end State Zip end SP- 97453
Garrett C Sherrit  How you would like your name to appear on the ballot  Garrett Sherrit  Candidate Residence/Route Address  Street Address  Street Address  City  Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone  541) 888-8893  Cell Phone  541) 404-0028  Cell Phone  541) 888-8893	end State Zip end SP- 97453
How you would like your name to appear on the ballot  Garrett Sherrill  Candidate Residence/Route Address  Street Address  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  City  City  Cell Phone  541) 888-8893	end State Zip end TP 97453
Candidate Residence/Route Address  Street Address  2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  City  Home Phone  541) 404-0018  Cell Phone  541)	
Candidate Residence/Route Address  Street Address 2965 Myrtle St. Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone 441) 888-8893  City  Cell Phone 541) 888-8893  City	
Candidate Residence/Route Address  Street Address 2965 Myrtle St. Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone 441) 888-8893  City  Cell Phone 541) 888-8893  City	
Street Address 2965 Myrtle St.  Candidate Mailing Address and Contact Information  Street Address or PO Box  City  Work Phone 441) 888-8893  (541) 404-0028  City  Cell Phone (541) 888-8893	
Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  44) 888-8893  Cell Phone  541) 404-0018  Cell Phone	
Candidate Mailing Address and Contact Information  Street Address or PO Box  Work Phone  541) 888-8893  Cell Phone  541) 404-0018  Cell Phone	
Work Phone Home Phone Cell Phone (541) 888-8893 (541) 404-0028 (541)	State Zip
(541) 888-8893 (541) 404-0028 (541)	
Email Address Web Site	404-0028 Fax
gar sherring gradit record	if applicable
Race and Ethnicity Optional	
Occupation (present employment) If no relevant experience, None or NA mus	the entered
Director of Residential Services for	Star of Hada
offedit by residentifice services for	Star or Make
	***************************************
Occupational Background (previous employment) if no relevant experience, f	one or NA must be entered,
Retail management of twenty	

omplete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
suth Waster Dregon Community		Associates Degree	fire science
U U			
ducational Background (other) Attach a separa	te 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)

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)

3/8/23