

Filing of Candidacy for Special District Nomination

SEL 190

rev 1/08: ORS 255.235

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please type or print legibly in black ink

↓ candidate name

Pamela Stebbeds Knowles

filing for office of

Director

how name should appear on ballot

district, position or zone number *if applicable*

Pam Knowles

Portland School District #1J, Zone 5

residence address

3655 NE Merges Drive

county of residence

home phone

work phone

Multnomah

503-288-2005

503-552-6755

fax

email address

date of election

pamknowlesforgreatschools@gmail.com May 19, 2009

mailing address where all correspondence will be sent

3655 NE Merges Drive, Portland, Oregon 97212

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.

required information (if no relevant information, list "None")

↓ occupation *present employment - paid or unpaid*

Chief Operating Officer and General Counsel, Portland Business Alliance

occupational background *previous employment - paid or unpaid*

Development and Marketing Director, Portland Center Stage

Consultant, Portland Schools Foundation

Executive Director, State of Oregon Commission on Judicial Fitness and Disability

Attorney, Partner, Davis Wright Tremaine

High School Teacher, Josephine County School District

↓ **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*

Lewis and Clark Law School

JD

Law

Oregon State University

BS

History & Education

Beaverton High School

12

diploma

general

other

continued on the reverse side of this form

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required information (if no relevant information, list "None")

↓ prior governmental experience *elected or appointed*

Mayor's and County Chair's Education Strategy Team
Multnomah County Task Force on Vital Aging
Oregon Commission on Child Care

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 \$300 or receive more than \$300 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$300 during a calendar year, I must follow the requirements detailed in the 2008 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 2008 Campaign Finance Manual.

2/6/09
date signed

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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) No person may be a candidate for more than one district office, unless the district has less than 10,000 electors residing in the district. No person may be a candidate for more than one position on the same board to be filled at the same election. (ORS 249.013).

RECEIVED
2009 FEB -6 AM 4:09
DIRECTOR OF ELECTIONS

for office use only

NS
initials

4634
cash or check number

WLA
candidate id number

21977
receipt number

WLA
office number