

**CUB Board of Governors
Candidate Filing Form**

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Employer: _____ Occupation: _____

Occupational Background: _____

Congressional District: _____

Do you own or control, either singly or in combination with any immediate family member, utility stocks or bonds, issued by a utility regulated by the Oregon Public Utility Commission, of a total value in excess of \$3,000? Yes No (*circle one*)

Do you currently hold elective office at any level? Yes No (*circle one*)

Are you currently seeking elective office at any level? Yes No (*circle one*)

Are you currently a state public official (in an executive position in a state agency)?
Yes No (*circle one*)

Do you intend to collect campaign contributions or make campaign expenditures in excess of \$50.00?
Yes No (*circle one*)

(Note: If you do intend to collect contributions or make expenditures in excess of \$50.00, you will need to keep a record of contributions and expenditures and submit it to CUB at the end of the election period, as required by ORS 774.070 (4).)

You can submit a candidate statement of up to 300 words, stating your qualifications and reasons for seeking a position on CUB's Board of Governors. The statement will be provided to CUB members in your congressional district via the newsletter. Please submit your candidate statement in electronic format. The 300 word limit is strictly adhered to.

Mark one:

_____ I am submitting a candidate statement of up to 300 words. It is attached to this filing form in an electronic format.

_____ I am not submitting a candidate statement.

I certify that I meet the following criteria of eligibility to file for candidacy to run for the CUB Board of Governors. I understand that not meeting any of the criteria disallows my eligibility.

I am a member of CUB in good standing.	Yes	No (circle one)
I reside in the congressional district I have indicated on this form.	Yes	No (circle one)
I am not employed by a utility regulated by the Oregon PUC.	Yes	No (circle one)

Please read and sign: *All information provided on this filing form and in my candidate's statement are true. I understand that CUB may seek to verify any information provided either on this form or in my candidate statement. I understand that it is my responsibility to verify any information that I have provided to CUB as part of my candidacy.*

Signed: _____ Date: _____