

**Candidate Filing
District**

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: *Board of Directors Position #6*

District, Position or County: *Grants Pass School District 7*

Filing Information

Filing with the required \$10.00 fee

Prospective Petition

Candidate Information

Name of Candidate

First

Garry

MI

L.

Last

Penning

Suffix

Title

How you would like your name to appear on the ballot

Garry L. Penning

Candidate Residence/Route Address

Street Address

3317 Leonard Rd

City

Grants Pass

State

OR

Zip

97527

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

Street Address or PO Box

3317 Leonard Rd

City

Grants Pass

State

OR

Zip

97527

Work Phone

Home Phone

Cell Phone

541-210-1405

Fax

Email Address

penning@grantspass.com

Web Site, if applicable

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

Director, Rogue Waste Systems

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

Republic Services, Grants Pass Sanitation

RECEIVED

FEB 20 2019

**JOSEPHINE
COUNTY CLERK**

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
Washington State University	B.S.	Ag. Mechanization	
Floyd Valley High School	12		

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.

15 yrs. Grants Pass School Board

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)

Garry L Penning
Candidate's Signature

2/20/19
Date Signed

For Office Use Only Initials _____

JOSEPHINE COUNTY RECORDING
500 NW 6TH STREET
GRANTS PASS, OR 97526

209739 2 RHENKELS
02/20/2019 9:56:05 AM
GARRY PENNING
GPS# 7, POSITION #6

E-E	35.00	
Filing Fee 10	10.00	
V/P Non-paid Candidate	25.00	
# Of Voter Pamphlet Photos:		
2019-000516 02/20/2019 9:55:27 AM		

Total	\$35.00	
CASH	50.00	
CHANGE	-15.00	
Total Received	35.00	
Amount Due	0.00	

Thank You
Retain this receipt for your records