### **Precinct Committeeperson**

To be filed with the County Elections official

**SEL 105D** 

rev 08/23 ORS 248.017, 249.031

Filing Dates for May 21, 20	024, Primary Election	*		Di
First Day to File	September 14, 2023	Last Day to File	<sup>1</sup> May 21,	24, 8 pm
Precinct Information			Political Party	f 4 ''
Number 032	or Name		☐ Democratic	Republican
Candidate Information				
Name of Candidate				
Julianne	E Oland			Suffix
Residence Address street, of 37665 Richard		Sciu, OR 97374	FILE	0
Mailing Address if different	ardson Cap Rd		MAY 1 7 202	17
2	Scio ok 97	374	By MARCIE RICHEY, O	CLERK
Contact Phone		Email Address		Deputy
971-235-47	729	Julianne J	Tacksonahote	mail com
Race and Ethnicity Optional				
			ery miljer g	
Write-In Candidate Attesta	tion			
that I have been a mem 180 days before the pri	nt, I request that the county elember of the party selected above mary election (ORS 248.015); I was recinct committeeperson; I und form is true.	, subject to the excep will serve as a precinc	otions stated in ORS 24 t committeeperson if e	9.046, for at least elected; I am legally
Warning Supplying false inform prison for up to 5 yea election are considere	nation on this form may result i rs. (ORS 260.715). By filing this ed withdrawn.	n conviction of a felor write-in declaration, a	ny with a fine of up to any previously filed de	\$125,000 and/or clarations for this
			5/17/20 Date	024

## **Precinct Committeeperson**

To be filed with the County Elections official

Cay		1000	SEL 105D
4	C(	DPW	rev 08/23 ORS 248.017, 249.031
	///	<i>- u   []</i>	

Filing Dates for May 21, 2024, Primary Elect	ion				
First Day to File September 14	4, 2023 Last Day to	File May 21, 2024, 8 pm			
Precinct Information	RECEIVED	Political Party			
Number 035 or Name	MAY 16 2024	☐ Democratic Republican			
Candidate Information	LINN				
Name of Candidate	COUNTY ELECTIONS				
Cynthia (Cindy) A Las	* LUEHRING	Suffix			
Residence Address street, city, state, zip					
41747 (utoff Or	- lobarron	OR 97355			
Mailing Address if different					
Contact Phone	Email Addre	ss			
541-258-3992 Mike Luehring Chotmail. Con					
Race and Ethnicity Optional					
TILLU					
MAY 1 6 2024					
Write-In Candidate Attestation MARCIE RICHEY, CLERK LISCOM					
By signing this document, I request that the county elec <b>tions</b> official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true.					
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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn.					
Candinate		May 8, 2024			

035 18351353 LUEHRING, CYNTHIA ANNE 41747 CUT OFF DR LEBANON OR 97355-9150

#### **Precinct Committeeperson**

To be filed with the County Elections official

**SEL 105D** 

rev 08/23 ORS 248.017, 249.031

Filing Dates for May 21, 2024, Primary Election					
First Day to File	September 14, 2023	Last Day to File	May 21, 2024, 8 pm		
Precinct Information	The state of the s	1 - 72 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Political Party		
Number 46	or Name		☐ Democratic Republican		
Candidate Information					
Name of Candidate					
Markine	MI Last Revs	hall FII	LED Suffix		
Residence Address street, c	- 1704   1   1   1   1   1   1   1   1   1	MAY	1 5 2024		
31332 Wa	ferloo Gd.				
Mailing Address if different	~ 1	By WATTOIL B	JCHEY CLERK Deputy		
31332 Water	es Rd	14.01	6m Deputy		
Contact Phone		Email Address	NI .		
541-619-8886 Email Address  pmpershall Dg mail. com					
Race and Ethnicity Optional					
Caucasion					
Write-In Candidate Attesta	tion				
⇒ By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true.					
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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn.					
Candidate Signature			Macqua 2024 Date		

### **Precinct Committeeperson**

To be filed with the County Elections official



**SEL 105D** 

rev 08/23 ORS 248.017, 249.031

Filing Dates for May 21, 20	24, Primary Election			
First Day to File	September 14, 2023	Last Day to File	May 21,	2024, 8 pm
Precinct Information			Political Party	
Number 47 o	r Name	liveni i	Democratic	Republican
Candidate Information			ILFN	
Name of Candidate				
George	P. Leage	and the second s	RICHEY, CLERK	Suffix
Residence Address street, ci	y, state, zip	by the	ALL THE	
29780A	Church Dr S	5.W 4:21PM A1	bony, OR.	97321
Mailing Address if different 29780 Ch	urch Dr. 5.	G 9 9	* y	
Contact Phone		Email Address	- /	
541-231-	8482	Skunk je	ky o gui	oct.com
Race and Ethnicity Optional			e g	
White				
Write-In Candidate Attestat	ion			
⇒ By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true.				
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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn.				
			4/Zu/Ju Date	,24

16544226



YEAGER, GEORGE RONALD 29780 CHURCH DR SW APT A ALBANY OR 97321-9509 047

#### **Precinct Committeeperson**

To be filed with the County Elections official



Filing Dates for May 21,	2024, Primary Election			
First Day to File	September 14, 2023	Last Day to File	May 21	, 2024, 8 pm
Precinct Information		HED	Political Party	
Number 4	or Name	ILED	☐ Democratic	Republican
Candidate Information		AY 2 0 2024		
Name of Candidate		E RIGHEY CLERK		
First	MI Last By Lea	4:22 pm Deputy		Suffix
Residence Address stree	t, city, state, zip	LO DE SIM	Alban	11 12973
Mailing Address if differe	ent		of court	gran con
	wich ORSW 40	HA Albo	eny or	1732/
Contact Phone	231 8308	Email Address  GVOOVI	19Waniso	Le gnail co
Race and Ethnicity Option	nal		) ()	
Cauca	isian			
Write-In Candidate Atte	station			
⇒ By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true.				
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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn.				
Сан			5-20 Date	D-2024

#### **Precinct Committeeperson**

To be filed with the County Elections official



SEL 105D rev 08/23 ORS 248,017, 249,031

Filing Dates for May 21, 2024, Primary Election First Day to File September 14, 2023 Last Day to File May 21, 2024, 8 pm Precinct Information **Political Party** 061 Number or Name Democratic Republican APR 1 6 2024 Candidate Information MARCIE RICHEY, CLERK Name of Candidate First MI Last Suffix WINK Residence Address street, city, state, zip Albany, OR 97322 SE OXFORd Mailing Address if different **Contact Phone Email Address** 541 - 619 - 0604 WINKSTAI313@ YAHOO. COM Race and Ethnicity Optional Write-In Candidate Attestation → By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true. 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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn. Candid

### Write-In Candidate Declaration: Precinct Committeeperson (SEL 105D)

**Precinct Information** 

Number or Name of Precinct 84

**Political Party** Republican

County Linn

Candidate Information

Name of Candidate John M Schroeder

Residence Address 2633 9th St., Lebanon, Oregon 97355

Is mailing address different than residence address? No

Phone (541) 409-9558

Email warbirdfan@comcast.net

Race and Ethnicity (optional)

#### Write-In Candidate Attestation

By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249 046, for at least 180 days before the primary election (ORS 248 015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true.

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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn.

Candidate Signature

**Date Signed** 5/4/2024

FILED

MAY 0 6 2024

Deputy

By MARCIE RICHEY, CLERK

8:30 am



Received by Elections 5/4/2024 10:28 AM

> 084 18309548 SCHROEDER, JOHN M 2633 S 9TH ST LEBANON OR 97355-1003

#### **Precinct Committeeperson**

To be filed with the County Elections official



SEL 105D rev 08/23 ORS 248.017, 249.031

Filing Dates for May 21, 2024, Primary Election First Day to File September 14, 2023 Last Day to File May 21, 2024, 8 pm **Precinct Information Political Party** Number S or Name Republican Democratic MAY 2 1 2024 Candidate Information MARCIE/RICHEY, CLERK Name of Candidate First Suffix Deputy Timothy Residence Address street, city, state, zip 38884 Zorser Rd Albany, OR 97321 Mailing Address if different **Contact Phone Email Address** Timo HuberTo Butlerfarmi & Gunil 541-974 0078 Race and Ethnicity Optional Write-In Candidate Attestation → By signing this document, I request that the county elections official count any write-in votes that I receive. I also state that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information provided by me on this form is true. 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). By filing this write-in declaration, any previously filed declarations for this election are considered withdrawn. 5-20-24 **Candidate Signature** Date

### **Precinct Committeeperson**

To be filed with the County Elections official



**SEL 105D** 

rev 08/23 ORS 248.017, 249.031

Precinct Information  Number 85 or Name Abigail  Candidate Information  Name of Candidate  First MI Last Su Abigail  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Mill Last Su MAY 2 1 2024  Mailing Address if different N/A  Contact Phone Email Address (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  Write-In Candidate Attestation  By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, fe 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected;	Filing Dates for May 21, 2024, Primary Election					
Number 85 or Name Abigail □Democratic ■Re  Candidate Information  Name of Candidate  First MI Last Sur Abigail Koos-Henderson  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Contact Phone Email Address (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	er 14, 2023 Last Day to File May 21, 2024, 8 pm	Day to File September 14, 2023				
Candidate Information  Name of Candidate  First MI Last Survive Abigail Koos-Henderson FILED  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322 MAY 2 1 2024  Mailing Address if different N/A  Contact Phone Email Address (541) 223-2442 Email Address (541) 223-2442 a.koos10@yahoo.com  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	Political Party	nct Information				
First MI Last Sur Abigail Koos-Henderson FILED  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322 MAY 2 1 2024  Mailing Address if different N/A By MARCIE RICHEY, CLE N/A Email Address (541) 223-2442 a.koos10@yahoo.com  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in the county electi	oigail Democratic Republican	per 85 <b>or</b> Name Abigail				
Abigail  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Contact Phone  Contact Phone  Email Address  (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in						
Abigail  Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Contact Phone (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in		30-20-0-20-0-20-0-20-0-20-0-20-0-20-0-2				
Residence Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Contact Phone (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in		The state of the s				
Address street, city, state, zip 33768 Sunnyview DR. NE Albany, OR 97322  Mailing Address if different N/A  Contact Phone  Email Address  (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	Koos-Henderson					
N/A  Contact Phone  (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	Residence Address street, city, state, zip					
Contact Phone  (541) 223-2442  Race and Ethnicity Optional  Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in						
Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in		ict Phone				
Write-In Candidate Attestation  → By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	(541) 223-2442 a.koos10@yahoo.com					
⇒ By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in	Race and Ethnicity Optional					
⇒ By signing this document, I request that the county elections official count any write-in votes that I receive that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in						
that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; qualified to serve as a precinct committeeperson; I understand this information is a public record; and all in		-In Candidate Attestation				
The state of the s	that I have been a member of the party selected above, subject to the exceptions stated in ORS 249.046, for at least 180 days before the primary election (ORS 248.015); I will serve as a precinct committeeperson if elected; I am legally qualified to serve as a precinct committeeperson; I understand this information is a public record; and all information					
Warning Supplying false information on this form may result in conviction of a felony with a fine of up to \$125,00 prison for up to 5 years. (ORS 260.715). By filing this write-in declaration, any previously filed declaration election are considered withdrawn.						
	May 20, 2024					
Candidate Signature Date	Date	landate dignature				

100236520



KOOS-HENDERSON, ABIGAIL RENEE 33768 SUNNYVIEW DR NE ALBANY OR 97322

085



### Write-In Candidate Declaration Precinct Committeeperson

To be filed with the County Elections official

SEL 105D rev 08/23 OR3 248.017, 249.031

Filing Dates for May 21	, 2024, Primary Election			
First Day to File	September 14, 2023	Last Day to File	May 21	., 2024, 8 pm
Precinct Information		Political Party		
Number 85	or NameMicah		Democratic	Republican
Candidate Information	//× (i			
Name of Candidate				
First	MI Last	FILE	n	Suffix
Micah	W Smith		<b>ט</b>	1 commen
Residence Address stree	et, city, state, zip	MAY 2 1 20	24	
		By MARCIE RICHEY	CLERK	
Mailing Address if differen	ent	4152 pm	Deputy	
1115 SE Jackson Str	eet, Albany OR 97322	Tisepin	FYFE	
Contact Phone		Email Address		
(541) 791-6355		Deputysmith770@	gmail.com	
Race and Ethnicity Optio	nal			
Write-In Candidate Atte	station			
→ By signing this document that I have been a m	ment, I request that the county e ember of the party selected above	lections official count any	write-in votes that	I receive. I also state
180 days before the	primary election (ORS 248.015);	I will serve as a precinct co	mmitteeperson if	elected; I am legally
qualified to serve as	a precinct committeeperson; I ur	nderstand this information	is a public record	; and all information
provided by me on the	nis form is true.			
0		2.19		- 5000 AARS 100-080 - 100A
			vith a fine of up to	\$125,000 and/or eclarations for this
		ny	previously med di	eciarations for this
			-	
(Marie Marie			7/	21/216
Ca				
~E.S.			Date	