

Office of the City Auditor – City Elections
1221 SW 4th Ave Room 140 ● Portland, OR 97204 ● (503) 823-3546

www.portlandonline.com/auditor/elections

AUD 120

03/2011

FILING OF CANDIDACY FOR NONPARTISAN NOMINATION FOR CITY OFFICE

		MAY 15, 2012	PRIMARY ELE	CTION
This	s information is a		nt legibly in black ink ecord and may be pu	s. blished or reproduced.
1. CITY OFFICE				
FILING FOR OFFICE Commissioner, Pos Commissioner, Pos Mayor	ition No. 1	2		☐ INCUMBENT FOR OFFICE
2. CANDIDATE INFO	ORMATION			
NAME OF CANDIDA	TE: Eilee	en Brad	. 4	
NAME SHOULD APP	PEAR ON BALLO	OT AS FOLLOWS	Eileen	Brady
RESIDENTIAL ADDI	RESS (Street/Rou	te, City, State, Zip	Code) 1242	SE 60th Portland OR 97215
				ortland, OR 97293
COUNTY OF RESIDI	ENCE MULT	nomah		
TELEPHONE (HOM)	E):	TELEPHONE (H 503-233-	OME):	CAMPAIGN TEL. (Optional) 503-432-6172
CAMPAIGN EMAIL ADDRESS: info@cileenfor Mayor. com				
CAMPAIGN WEB SI	TE (Optional):	www.ei	ieen for ma	Yor, Com
3. TYPE OF FILING				
TO THE CITY AUDITOR, CITY OF PORTLAND:				
☐ FILING OF CANDI	DACY BY DECL	ARATION, WITH	THE REQUIRED FILE	ING FEE (\$30 Commissioner/\$50 Mayor)
FILING OF CANDI SIGNED BY THE C	DACY BY <u>PROS</u> ANDIDATE, ANI	PECTIVE PETITION STATEMENT OF	ON, WITH THE REQUIE OR MORE CIRCU	UIRED PROPOSED SIGNATURE SHEET LATORS WILL/WILL NOT BE PAID
☐ FILING OF CANDIDACY BY PERFECTED PETITION, WITH THE REQUIRED NUMBER OF SIGNATURES CERTIFIED BY APPROPRIATE COUNTY ELECTIONS OFFICE.				
MAY 15, 2010 PRIMA				
First Day to File for Can Last Day to File for Can Deadline to Withdraw C Last Day to File a Coun	didacy: 5:00 PM, Candidacy: 5:00 PM	Tuesday, March 6, M, Friday, March 9	2012 2012	0.2012
FEES, SIGNATURES	& QUALIFICAT	IONS FOR OFFI	CES OF CITY COM	MISSIONER AND AUDITOR
Filing Fee: \$30/\$50 Ol Qualifications: (1) U.S.			land; (3) Resident of P	ortland as of May 15, 2011
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OCCUPATION (Present Em	ployment – Paid or Unpaid)		
N/A	1 1		
1.7.7.			•
			•
	ROUND (Previous Employme		·
-Board Chair and Co-c	when celllo Group m	ebia (2002 - Present)	
- Founding Co-owner, N	ew seasons Narket/	1999-2010)	-3
. Vice president food	and farms program?	Ecotrust (2001-200	5)
. Operations manager le	xecutive producer, play	rimm rechnologies (1993	3-2007
- Human Resource Dire	ector, executive Tean	n, Nature's Fresh N	orthwest (1986-1991)
EDUCATIONAL BACKGRO	OUND (Schools Attended; use	attachment if needed)	
Complete Name of School -	Last grade level	Diploma/Degree/Certificate	Course of study (optional)
no acronyms	completed	(AA, BA, BS, MA, PhD, etc.)	· · · · · · · · · · · · · · · · · · ·
Wergreen State College	Bachelor's Degree	BA	
3			
		1	
PRIOR GOVERNMENTAL	EXPERIENCE (Elected or Ap		ard/(2007-presenti
PRIOR GOVERNMENTAL -Board Member/	rice Chair, Oregon Oregon	ppointed) Health Policy Book Health Ford Book te Mails Commiss	ard/(2007-present)
PRIOR GOVERNMENTAL -Board Member/V -Board Member, Me	lice Chair, Oregon Oregon tro Blue Ribbon Bi	Health Policy Book Health FUND Book	ard/(2007-present)
PRIOR GOVERNMENTAL -Board Member/V -Board Member, Me	lice Chair, Oregon Oregon tro Blue Ribbon Bi	Health Policy Book Health FUND Book	ard/(2007-present)
PRIOR GOVERNMENTAL - BOOK MEMORY - BOOK MEMORY 5. CANDIDATE SIGNATUR By signing this docum	nice Chair, Oregon Oregon tro Blue Ribbon Bi	Health Policy Book Health Ford Book te Mails commiss	ard/(2007-present)
PRIOR GOVERNMENTAL - Board Member / Newber / Ne	nice Chair, Oregon Oregon The Blue Ribbon Bi RE ment, I hereby state: the nomination for the office if for said office if elected;	Health Policy Book Health Fond Book Fe Trails Commiss ndicated above;	
PRIOR GOVERNMENTAL - Board Member / Newber / Ne	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational
PRIOR GOVERNMENTAL - Board Member / Newber / Ne	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Fond Book Fe Trails Commiss ndicated above;	cational and occupational
PRIOR GOVERNMENTAL - Board Member / Newber / Ne	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational
PRIOR GOVERNMENTAL - Board Member / Newber / Ne	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational
PRIOR GOVERNMENTAL BOOK MEMOET NEW CANDIDATE SIGNATUR By signing this document of the stall accept that I shall qualify that all informations.	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational
PRIOR GOVERNMENTAL BOOK MEMORY CANDIDATE SIGNATUR By signing this docur THAT I shall accept THAT I shall qualify THAT all informatio background, and price	nice Chair, Oregon Oregon Oregon RE Ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational
PRIOR GOVERNMENTAL - Boar's Member / Newber / N	ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form or governmental experience, is idate's Signature	thealth Policy Book Health Ford Book The Trails Commiss Indicated above; In including my occupation, educated to the best of my knowled	cational and occupational lge. /3/// Date Signed
PRIOR GOVERNMENTAL - Boar's Member () - Boar's Member () - Boar's Member () By signing this document of the signing the signin	ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form or governmental experience, is idate's Signature formation on this form may resu	Health Policy Book Health Ford Book Health Ford Book He Trails Commiss Indicated above; In including my occupation, edu	cational and occupational lge. /3/// Date Signed
PRIOR GOVERNMENTAL - Boar's Member / Newber / N	ment, I hereby state: the nomination for the office if for said office if elected; in provided by me on this form or governmental experience, is idate's Signature formation on this form may results. (ORS 260.715).	ndicated above; i, including my occupation, edus true to the best of my knowleds. It in conviction of a felony with a	cational and occupational lge. /3/// Date Signed fine of up to \$125,000
PRIOR GOVERNMENTAL BOOK MEMORY BOOK MEMORY BOOK MEMORY BY SIGNATUR THAT I shall accept THAT I shall qualify THAT all informatio background, and price VARNING: Supplying false in nd/or prison for up to five years to person shall file a nominatin	ment, I hereby state: the nomination for the office if for said office if elected; in provided by me on this form or governmental experience, is idate's Signature formation on this form may results. (ORS 260.715). g petition or declaration of candi	ndicated above; i, including my occupation, edus true to the best of my knowleds It in conviction of a felony with a dacy for more than one lucrative of	cational and occupational lige. 3
PRIOR GOVERNMENTAL - Board Member (No. 1) By signing this document of the signing this document. That I shall accept that I shall qualify that all information background, and prior to five years to person shall file a nominating or many election, unless the person shall file and the person shall file	ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form or governmental experience, is idate's Signature formation on this form may results. (ORS 260.715). g petition or declaration of candidate on first files a written withdrawa	thealth Policy Book thealth Ford Book the Trails Commiss of true to the best of my knowled the true to the best of a felony with a dacy for more than one lucrative of a with the officer who accepted the UDITOR'S OFFICE USE ONI	cational and occupational lige. 3
Boar's Member No. Boar's Member No. By signing this document of the signing this document of the signing this document. That I shall accept that I shall qualify that all information background, and price of the significant of the significa	ment, I hereby state: the nomination for the office if for said office if elected; n provided by me on this form or governmental experience, is idate's Signature formation on this form may results. (ORS 260.715). g petition or declaration of candidate on first files a written withdrawa	thealth Policy Book thealth Ford Book the Trails Commission, including my occupation, educative to the best of my knowled by the true to the best of my knowled accepted the dacy for more than one lucrative of a with the officer who accepted the structure of the	cational and occupational lige. 3

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Statement One or More Petition Circulators Will be Paid

SEL 301 rev 01/10: ORS 250.045,

OProspective Petition initial filing with filing officer

I/We hereby declare one or more petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition. I/We understand the filing officer must be notified not later than the 10th day after I/we first have knowledge or should have had knowledge that no petition circulator will be compensated for obtaining signatures. By signing this document, I hereby state that no circulators will be compensated on this petition based on the number of signatures obtained by the circulator.

O Completed Petition signatures submitted to filing officer

By signing this document, I hereby state that no circulators have been compensated on this petition based on the number of signatures obtained by the circulator.

Signed					Date Signed	

Signed					Date Signed	
5	1h t	3ng	· of · o and reserved	generalise in a trade of dispersion of the second of the s	8/3/11	
The nor	n-Partisan n	omination			•	of Portland

→ Statement must be signed by the candidate for nomination, the chief sponsor for certificate of nomination, chief sponsor for Minor political party formation petition or all chief petitioners for an initiative or referendum petition.



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.

Statement No Petition Circulators Will be Paid

SEL 301 rev 01/10: ORS 250.045,

rev 01/10: ORS 250.045, ORS 250.165, ORS 255 169 ORS 255.135

O Prospective Petition Initial Filing with Filing Officer

I/We hereby declare no petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition. I/We understand the filing officer must be notified not later than the 10th day after I/we first have knowledge or should have had knowledge that any petition circulator will be compensated for obtaining signatures. By signing this document, I hereby state that no circulators will be compensated on this petition.

O Completed Petition Signatures Submitted to filing officer

By signing this document, I hereby state that no circulators were compensated for obtaining signatures on the attached petition.

Identify Petition			
	rakisanin oleh mini karistan di seri dan mengan di seri dan di Seri dan di seri dan di se		
Signed	· · · · · · · · · · · · · · · · · · ·	Date Signed	
Signed	· ·	Date Signed	
Signod		D. 0. 1	
Signed		Date Signed	

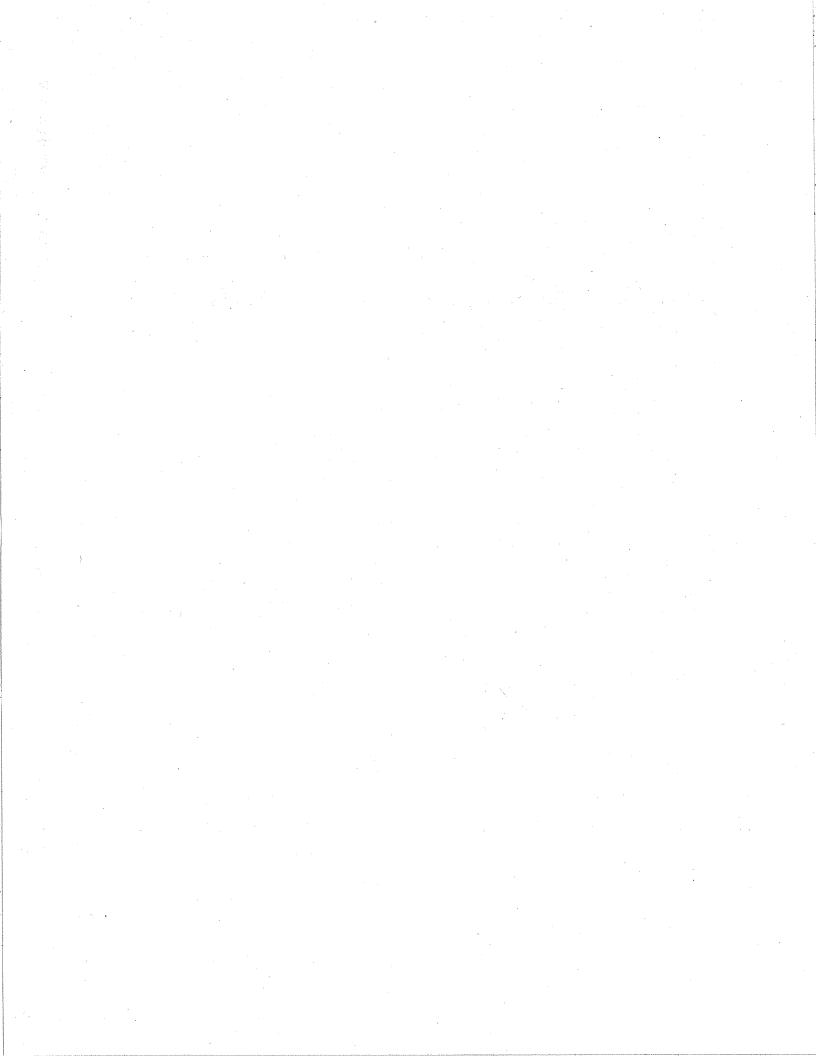
→ Statement must be signed by the candidate for nomination, the chief sponsor for certificate of nomination, the chief sponsor for Minor political party formation petition, or all chief petitioners for an initiative or referendum petition.



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AUDITOR 08/05/11 PM



Petition for Nonpartisan Nomination Signature Sheet

Petition ID

One or More	O No Petition circulators will be	be paid (mark one)		
This is a candidate nomi	inating petition. Signers of this page	must be active registe	This is a candidate nominating petition. Signers of this page must be active registered voters in the following county: Multnomah	-
Note to Candidate: Petitic Submit the petition in am	Note to Candidate: Petition signatures must be verified before the Submit the petition in ample time for the process to be completed		petition can be filed with the filing officer. before 5pm on the filing deadline day.	
Candidate's Name	Office		District or Position Number if applicable	
Eileen Brady	Mayor	r of City of Portland	tland	
To the Secretary of Sta to the office indicated, be	To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters to the office indicated, be placed upon the appropriate ballot at the next בינים הבינים את אים אים אים הינים אים	icial/City Recorder, W the next ריין איי	To the Secretary of State of Oregon/County Elections Official/City Recorder, We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the appropriate ballot at the next (ביר אים אים אים אים אים האים האים האים האים	ominatión
→ Signers must initial any	y changes that they or the circulator ma	lakes to their printed na	ďa	
Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code Pre	Precinct # optional
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7	des extraordes describes a traction accurate management management management management.			
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6	remove the second manual of the manual continues and the second manual continues and the secon			
. 01				
Circulator Certification I hereby certify that I witr to sign the petition. (ORS	Circulator Certification This certification must be signed by the circulator! I hereby certify that I witnessed the signing of the signature sheet by each to sign the petition. (ORS 249.061) I also certify that compensation I receive	e circulator! eet by each individual w rtion I received, if any, w	Circulator Certification This certification must be signed by the circulator! I hereby certify that I witnessed the signing of the signature sheet by each individual whose signature appears on the signature sheet, and I believe each individual is an elector qualified to sign the petition. (ORS 249.061) I also certify that compensation I received, if any, was not based on the number of signatures obtained for this petition. Warning! Falsely signing this	is an elector qualified g! Falsely signing this
statement may result in c	onviction of a felony with a fine of up t	to \$125,000 and/or pris	son for up to 5 years. (ORS 260.715)	
Circulator Signature			Date Signed mm/dd/γγ	

Circulator's Address street, city, zip code County Elections Official Certification Printed Name of Circulator تَ

I hereby certify

signatures on this petition are those of active registered voters in

Date Certified mm/dd/yy

County, Oregon.

Sheet Number

Signature of County Elections Official



Office of the City Auditor – City Elections
1221 SW 4th Ave Room 140 ◆ Portland, OR 97204 ◆ (503) 823-3546
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AUD 125

Rev 03/11

CANDIDATE & CAMPAIGN INFORMATION

·	May 15, 2012 Primary Election
	Please type or print legibly in black ink.
The public, media, and other int Auditor's Office publishes a Reg	erested parties often request information regarding candidates & campaigns. The City ister of Candidates which is made available to the public.
Information provided on the Re Nonpartisan Nomination for C information below.	gister of Candidates will be taken directly from your "Filing for Candidacy for ity O ffices" and/or S tatement of O rganization forms, unless you provide alternate
City Office (check one):	
Commissioner, Position	No. 1 Commissioner, Position No. 4 Mayor
Candidate's Name: Eileen Brady	
Name of Principal Campaign Co Friends of Eileen Brady	mmittee:
Mailing Address: P.O. Box 14458 Portland, OR 972	293
Work Phone Number: 503-913-4085	Campaign Web Site: www.eileenformayor.com
Fax Number:	E-Mail Address:

