

Office of the City Auditor – City Elections
1221 SW 4<sup>th</sup> Ave Room 140 • Portland, OR 97204 • (503) 823-3546
www.portlandonline.com/auditor/elections

	MA) Please	7 15, 2012 P type or print	RIMARY legibly in bl	ELEC	08/2011 NATION FOR CITY OFFICE TION lished or reproduced.		
I. CITY OFFICE							
FILING FOR OFFICE OF: Commissioner, Position No Commissioner, Position No					☐ Incumbent for Office		
II. CANDIDATE INFORMA	TION						
Name of candidate $\angle o$	ren ch	aules	Brou				
Name of candidate  Loren Charles Brown  Name should appear on ballot as follows  Loren Charles Brown  Residential address  4411 SE Center St  City 12 11 State Tip code							
Residential address 461	1/52 (	enter	51				
Partland	CR	Zip code	ec (	County	MULTNEMMY		
Mailing Address (For all corre	55746						
City Portland	State	Zip code	97238				
Home Phone	Work	Phone			Cellular Phone 53, 79, 106 C		
Campaign Email Address  5 5 1 c  Campaign Website (Optional)	lad 1962	Plive um	Campaign	Phone (C	Optional)		
Campaign Website (Optional)							
III. TYPE OF FILING TO THE CITY AUDITOR, CIT	Y OF PORTLAN	D·					
			Fee: \$30 Co	ommissic	oner / \$50 Mayor (ORS 249.056)		
Filing of candidacy by prosp	ective petition, w	ith the required	d proposed si	gnature s			
Filing of candidacy by comp	oleted petition, wi fficials (ORS 249	th the required .020, 249.064)	signature sho	eets certi	fied by the appropriate		
MAY 15, 2010 PRIMARY ELD First Day to File for Last Day to File for Deadline to Withd Last Day to File a	or Candidacy: or Candidacy: Iraw Candidacy:		5:00 5:00	PM, Tue PM, Frie	ursday, September 8, 2011 esday, March 6, 2012 day, March 9, 2012 enday, March 19, 2012		
FEES, SIGNATURES & QUA Filing Fee: \$30 O Qualifications: (1	Commissioner / \$	50 Mayor - C	)R Requir	ed Signat	IISSIONER AND AUDITOR tures (100 valid) Resident of Portland as of May 15, 2011		

IV: REQUIRED INFORM	ATION (ORS 249.031, PCC 2.0	18 070 and PCC 2 08 080)
Occupation (Present employs M- CRU - F	nent—Paid or Unpaid)	at on Bureny land Right Press
Screenwiter		2010 - to present
	Previous employment - Paid or I	
on rea,	estate broke	a 2007-2010
Termo	v sansie	rus - to present
Girmen	ada cata	rens - to present wind temp agencies rens to present icayor My and Ballas Ty and form
Educational Background (S.	chools attended. Use attachment	if needed)
Complete Name of School	Last grade level completed	Diploma/Degree/Certificate Course of study
No acronyms)	g	(AA, BA, BS, MA, PhD, etc.) (optional)
Bureau of land Myone	hiretishter certifi	sete (red card firefighting con
M-state Next Line	ge (2)	By prychology begined
les lingels litz a	Heze (2)	AN Human Services Cencres
Gigts Language	late 124 no	Diplome Scraul/veglise
Prior Governmental Experie	ence (Elected or Appointed)	uns
Student	- bover ament-	- Representative for Hands CR
J V	A	- Representative for Handice, Affrici ( Los Angoles City Coll
	•	The contract of the contract o
		CAT, CO
. CANDIDATE SIGNATU	RE	
By signing this	document, I hereby state:	
THAT I shall o	ccept the Bomination for the o	6Good indicated above
THAT I shall q	dalify for said office if elected:	
THAT all infor	mation provided by me on this	s form, including my occupation, educational and nental experience, is true to the best of my knowledge.
	lynground, and prior governing	ental experience, is true to the best of my knowledge.
Cano	lidate's Signatue	Date Signed
ARNING: Supplying false	information on this form may res	ult in conviction of a felony with a fine of up to \$125,000
and/or prison for	up to five years. (ORS 260.715)	. Unless the person has withdrawn from the first filing, all filings e a nominating petition or declaration of candidacy for more than
one lucrative off	ice before the date of the primary	election, unless the person first files a written withdrawal with the
officer who acce	pted the initial filing (ORS 249.0	013(2)).
	AREA BELOW FOR A	AUDITOR'S OFFICE USE ONLY
itials I Cash? or □ Check No.		□ <\$750 □ <\$2,000 □ >\$2,000
Voter Registration Verified	9	Candidate Committee ID Number #