

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

AUDITOR 10/11/11 AM 11:22

AUD 120

08/2011

**FILING OF CANDIDACY FOR NONPARTISAN NOMINATION FOR CITY OFFICE
MAY 15, 2012 PRIMARY ELECTION**

Please type or print legibly in black ink.

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I. CITY OFFICE**FILING FOR OFFICE OF:**

- ☐ Commissioner, Position No. 1
☐ Commissioner, Position No. 4
☒ Mayor

☐ Incumbent for Office**II. CANDIDATE INFORMATION**

Name of candidate

HOWARD RUBIN

Name should appear on ballot as follows

HOWIE RUBIN

Residential address

7213 N. ALMA AVE

City

PORTLAND

State

OR

Zip code

97203

County

MULTNOMAH

Mailing Address (For all correspondence)

POB 83911

City

PORTLAND

State

OR

Zip code

97283

Home Phone

Work Phone

503 289-1667

Cellular Phone

503 504 4534

Campaign Email Address

Campaign Phone (Optional)

Campaign Website (Optional)

III. TYPE OF FILING

TO THE CITY AUDITOR, CITY OF PORTLAND:

- ☒ Filing of Candidacy by Declaration, with the Required Filing Fee: \$30 Commissioner / \$50 Mayor (ORS 249.056)
- ☐ Filing of candidacy by prospective petition, with the required proposed signature sheet (SEL 121) and the statement one or more circulators will or will not be paid (SEL 301) (ORS 249.020)
- ☐ Filing of candidacy by completed petition, with the required signature sheets certified by the appropriate county elections officials (ORS 249.020, 249.064)

MAY 15, 2010 PRIMARY ELECTION FILING DATES

First Day to File for Candidacy:

8:00 AM, Thursday, September 8, 2011

Last Day to File for Candidacy:

5:00 PM, Tuesday, March 6, 2012

Deadline to Withdraw Candidacy:

5:00 PM, Friday, March 9, 2012

Last Day to File a County Voters' Pamphlet Statement:

5:00 PM, Monday, March 19, 2012

FEES, SIGNATURES & QUALIFICATIONS FOR OFFICES OF CITY COMMISSIONER AND AUDITOR

Filing Fee: \$30 Commissioner / \$50 Mayor OR Required Signatures (100 valid)

Qualifications: (1) U.S. Citizen; (2) Registered Voter in Portland; (3) Resident of Portland as of May 15, 2011

AUD 120

IV. REQUIRED INFORMATION (ORS 249.031, PCC 2.08.070 and PCC 2.08.080)

Occupation (Present employment – Paid or Unpaid)

INSURANCE INDEPENDENT AGENT

Occupational Background (Previous employment – Paid or Unpaid)

ACADEMIC COUNSELOR, ADJUNCT PROFESSOR
 TRUCK DRIVER, MOTOR COACH OPERATOR, MEDIA
 BUSINESS OWNER, ENTREPRENEUR SPECIALIST
 WATER SALTY / ADAPTED AQUATICS WATER SALTY INSTRUCTOR
 FOOTBALL COACH

Educational Background (Schools attended. Use attachment if needed)

Complete Name of School (No acronyms)	Last grade level completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc.)	Course of study (optional)
BROOKLYN COLLEGE		MA	PSYCH

Other:

Prior Governmental Experience (Elected or Appointed)

NONE

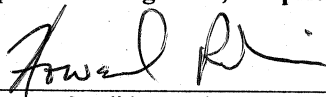
V. CANDIDATE SIGNATURE

By signing this document, I hereby state:

THAT I shall accept the nomination for the office indicated above;

THAT I shall qualify for said office if elected;

THAT all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge.



Candidate's Signature

10/11/11

Date Signed

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 five years. (ORS 260.715). Unless the person has withdrawn from the first filing, all filings are invalid (ORS 249.013(3)). No person shall file a nominating petition or declaration of candidacy for more than one lucrative office before the date of the primary election, unless the person first files a written withdrawal with the officer who accepted the initial filing (ORS 249.013(2)).

AREA BELOW FOR AUDITOR'S OFFICE USE ONLY

Initials _____

☐ Cash? or ☐ Check No. _____☐ Voter Registration Verified? _____☐ <\$750 ☐ <\$2,000 ☐ >\$2,000

Candidate Committee ID Number # _____