**SEL 190** 

District							SEL 190 Els 2 Els	
1 This form must be filed w	rith county elec	tions offi	cial. All info	rmation must be comple	ted or the for	n will be re		
2023 District Election Filing Da	ites	STATE OF	60				A PROPERTY OF	
Candidate Filing February 4, 2	023 to March 1	6, 2023		Withdrawal Date March 16, 2023			TASSI O'NI	
This filing is an	Original			Amendment			COUNTY	
Office Information					Ze Pri x Zi			
Filing for Office of: Tillamool	k School Dis	strict #9	, Director	•				
District, Position or County:PC	sition 1	· · · · · · · · · · · · · · · · · · ·						
Filing Information								
Filing with the required \$10	).00 fee					•		
Prospective Petition								
Candidate Information	dan parting and	COST 1	TARKER S	New Contract of	seemy of the fil	As estatore in		
Name of Candidate					mar est comment official as (2 mil)			
First Danell	Į N		Last Boggs			Suffix		
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How you would like your nam		the ballo	t grassing to a	tarrende e sacione i sul de	nicia entratia.	MATERIAL PROPERTY.	repain of all ser	
or Danell M. Boggs, DB					·			
Candidate Residence/Route A	ddress				le tra mani	o signific	BRAVA .	
Street Address 1745 Netarts HWY West				City Tillamook		State Or	Zip 97141	
Candidate Mailing Address an	d Contact Infor	mation						
Street Address or PO Box PO Box 816				City Tillamook	ı	State Or	Zip 97141	
Work Phone 503-842-3900				Cell Phone Fax 503-449-9612				
Email Address Janellmb1967@gmail.co	om			Web Site, if applicable				
			Oga National Property and Con-			Mensseemenn		
Race and Ethnicity Optional						0.840	er i North and	
White, non-hispanic			···					
Occupation (present employm	nent) If no relev	ant exper	rience, None	or NA must be entered.				
Fillamook County Comm								
Behavioral Health Clinic	~	r	•	·				
icensed Clinical Social	Worker							
Occupational Background (pre	vious employm	nent) If no	relevant e	perience, None or NA mu	ist be entered	eri we u		
Tillamook Family Couns	eling Center	r (5/200	0 - 9/201	8)		-		
Behavioral Health Clinic			e use disc	orders, and Problem	Gambling			
Developmental Disabiliti		ınager						
Adult Foster Care Licens Adult MH and DD Abuse		ır						
TOOK WIT GITG DD / NOGOC	- in congato	•						

Educational Background (schools att	ended) If no relevant ex	perience, None	or NA must be entered.	CARTON SELECT
Complete name of School	Last Grade	e completed	Diploma/Degree/Certificate	Course of Study
Arizona State University	Ì	İ	Doctorate	Behavioral Health
Portland State University			Masters	Social Work
Eastern Oregon University			Bachelors of science	Liberal studies and Psychology
Tillamook Bay Community College		ļ	Associates	General studies
Educational Background (other) Attac	ch a separate sheet if ne	cessary.		
Tillamook High school	Graduated in 1985	High school	diploma	

Prior Governmental Experience (elected or appointed) If no relevant experience, None or NA must be entered.

Mayor of Rockaway Beach, Oregon; appointed in 2011-2012 Mayor of Rockaway Beach, Oregon; elected in 2012-2013

TBCC Board; elected in 2015-2018

## Campaign Finance Information (not applicable to candidates for federal office)

A candidate must file a Statement of Organization not later than three business days of first receiving a contribution or making an expenditure and no later than the deadline for filing a nominating petition, declaration of candidacy, or certificate of nomination, whichever occurs first, unless they meet the criteria for an exemption. To meet the criteria, the candidate must serve as their own treasurer, not have an existing candidate committee, and not expect to spend or receive more than \$750 during the entire calendar year (including in-kind contributions and personal funds).

If you have an existing candidate committee you must amend the statement of organization not later than 10 days after a change in information. This includes changes to the election you are active in and the office you are running for.

See the Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee.

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

DBH, CCSW



## 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)

Candidate's Signature

Data Signad

Date Signed