

Filing Dates	Candidate Filing	State Voters' Pamphlet	Candidate Withdrawal
Primary Election May 20, 2014		Filed electronically using ORESTAR	
First Day to File	September 12, 2013	January 20, 2014	
Last Day to File	March 11, 2014	March 13, 2014	March 14, 2014
General Election November 4, 2014			
First Day to File	June 4, 2014	July 7, 2014	
Last Day to File	August 26, 2014	August 26, 2014	August 29, 2014

i All information must be completed or the form will be rejected.

This filing is an Original Amendment

Filing Officer

Secretary of State County Elections Official City Recorder (Auditor)

Candidate Information

Name of Candidate				
First	MI	Last	Suffix	Title
Stefani	C	Seffinger		

How you would like your name to appear on the ballot

First	MI	Last	Suffix
Stefani	C	Seffinger	

Candidate Residence/Route Address

Street Address	City	State	Zip	County
448 Taylor Street	Ashland	Oregon	97520	Jackson

Candidate Mailing Address

Street Address or PO Box	City	State	Zip
448 Taylor Street	Ashland	Oregon	97520

Contact Information: Only one phone number is required.

Work Phone	Home Phone	Cell Phone	Fax
(541)324-6414			
Email Address		Web Site, if applicable	
stefseffinger@yahoo.com		www.seffingerforcitycouncil.com	

Paying by Declaration or Petition:

Declaration, with the required fee

Office	Filing Fee	Office	Filing Fee
United States President	n/a	District Attorney	\$50
United States Vice President	n/a	County Judge	\$50
United States Senator	\$150	MSD Executive Officer, MAD Director	\$100
United States Representative	\$100	MSD Councilor	\$25
Statewide Offices	\$100	County Office	\$50
State senator or Representative	\$25	City Office	Set by charter or ordinance
Circuit Court Judge	\$50	Justice of the Peace	n/a

Prospective Petition Petition circulators will be paid Yes No

Office Information

Filing for Office of: Ashland city Council Position #4

District, Position or County: City of Ashland

Party Affiliation: Democratic Party Republican Party Nonpartisan

Incumbent Judge: Yes No Nondisclosure on file

Occupation (present employment) If no relevant experience, None or NA must be entered.

Retired School Psychologist who works part time as a glass artist making items for the home and garden.

Occupational Background (previous employment) If no relevant experience, None or NA must be entered.

School Psychologist/program Specialist (Pajaro Valley Unified School District)
lecturer /Teacher Trainer (Southern Oregon State College)
Ashland High School Counselor/Ashland Child Development Specialist/ Kindergarten teacher
Occupational Counselor, Park and Recreation Specialist

Educational Background (schools attended) If no relevant experience, None or NA must be entered.

Complete name of School (no acronyms)	Last Grade completed	Diploma/Degree/Certificate	Course of Study
California University at Northridge		BA	Psychology
California University at Northridge		MA	School Psychology

Educational Background (other) Attach a separate sheet if necessary.

Advanced Training in leadership, Professional Response Training, Emergency Response Training

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

Ashland Parks and Recreation Commission elected 2010 Vice Chair 2012 Chair 2013-present
Forest lands Commissioner , Parks Liasion 2011 to present /Senior Advisory Board 2012 to present
Council/parks Ad Hoc Committee/ signs and plaques, golf and dog subcommittees for Parks
Pajaro Valley Teachers Union Vice president 2003-2006 Santa cruz Montessori board president

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

Candidate Committee

- Yes, I have a candidate committee.
- No, I do not expect to spend more than \$750 or receive more than \$750 during each calendar year. I understand I must still keep records of all campaign transactions and if total contributions or total expenditures exceed \$750 during a calendar year, I must follow the requirements detailed in the Campaign Finance Manual.
- No, but will be filing a Statement of Organization for Candidate Committee (SEL 220).

By signing this document, I hereby state that:

- I will accept the nomination for the office indicated above
- I will qualify for said office if elected
- all information provided by me on this form is true to the best of my knowledge *and*
- no circulators will be compensated based on the number of signatures obtained by the circulator on a prospective petition

For Major Political Party Candidates

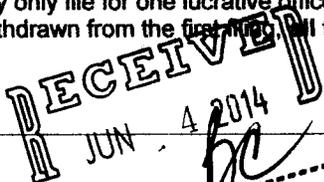
- if not nominated, I will not accept the nomination or endorsement of any political party other than the one named
- I have been a member of said political party, subject to the exceptions stated in ORS 249.046, for at least 180 days before the deadline for filing a nominating petition or declaration of candidacy (ORS 249.031)



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 or not more than one precinct committee person at the same election. Unless the person has withdrawn from the first filing, all filings are invalid. (ORS 249.013 and ORS 249.170)

Candidate's Signature *Sharon Springer*



Date Signed *June 4, 2014*

For Office Use Only Initials _____

Batch Sheet/CC Approval Code/Receipt Number _____

CERTIFICATE FOR VOLUNTARY CONTRIBUTION & SPENDING LIMITS CITY OF ASHLAND AMC 2.41

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Political Committee	<input type="checkbox"/> Primary 20__ <input checked="" type="checkbox"/> General 20 <u>14</u>	<input type="checkbox"/> Other Election Date
Candidate or Political Committee Name <u>Stefani Seffinger</u>		Committee Identification Number
Treasurer's Full Name		Telephone Number (day)
Address (street or route, city, state, zip code) <u>448 Taylor Street Ashland Or 97520</u>		
Office of Filing <u>Council position #4</u>		
<p>I certify that if I am signing as a candidate, I will not make attributable expenditures for this election in excess of \$3,352.00 (including expenditures of my principal campaign committee), or, if I am signing as a treasurer of a political committee organized exclusively to support or to oppose a candidate, I certify that the committee will not make attributable expenditures in this election in excess of \$3,352.00.</p>		
<u><i>Stefani Seffinger</i></u> Candidate or treasurer's signature		Date Signed <u>June 4, 2014</u>
<p>[NOTE: If the candidate or committee treasurer elects NOT to be bound by the expenditure limitations, the following line should be signed instead of the line above.]</p> <p>I elect not to be limited to the attributable expenditures specified in this certificate and city ordinance.</p>		
_____ Candidate or treasurer's signature		_____ Date Signed
<p>The City Recorder is authorized to publish a statement in the City, indicating whether or not the candidate has agreed to limit expenditures.</p> <p>If the City Recorder or the City Attorney finds that a candidate filing a declaration of limitation on expenditures has exceeded the applicable expenditure limit, at the next election at which the candidate is a candidate for election to public office, the City Recorder shall publish a statement, in the City, indicating that the candidate violated a previous declaration of limitation.</p>		<div style="border: 2px solid black; padding: 5px; transform: rotate(-5deg);"> <p style="margin: 0;">(Authorized)</p> <p style="font-size: 2em; font-weight: bold; margin: 0;">RECEIVED</p> <p style="margin: 0;">JUN 4 2014</p> <p style="margin: 0;">BY: <u><i>[Signature]</i></u></p> </div>

Certificate of Limited Contributions and Expenditures

PC 7

rev 1/14
ORS 260.112

Committee Information		
Name of Committee seffinger for City Council		Committee ID Number
Treasurer's Name if different than candidate		
First	Last	
Mailing Address as it appears on the Statement of Organization		
Street or PO Box 448 Taylor Street		
City Ashland	State Oregon	Zip Code 97520
Committee Type		
<input checked="" type="checkbox"/> Candidate	<input type="checkbox"/> Political Action Committee <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Measure <input type="checkbox"/> Recall <input type="checkbox"/> Caucus <input type="checkbox"/> Political Party	<input type="checkbox"/> Petition Committee <input type="checkbox"/> Initiative <input type="checkbox"/> Recall <input type="checkbox"/> Referendum
Year	Balance on January 1	

Notes

→ If a committee does not expect to receive a total of more than \$3,500 or spend a total of more than \$3,500 in a calendar year, a Certificate of Limited Contributions and Expenditures may be filed. A certificate must be filed no later than seven calendar days after receiving the first contribution or making the first expenditure in a calendar year.

→ A committee must continuously maintain detailed records of all contributions received and expenditures made even if it files a certificate. If at any time during the calendar year the total contributions or total expenditures exceed \$3,500 the committee must file all transactions electronically using ORESTAR. All transactions occurring in the calendar year must be filed no later than seven calendar days after exceeding the \$3,500 threshold. Refer to the Campaign Finance Manual for further information.

[Signature] hereby certify I expect neither the aggregate contributions received nor the aggregate expenditures made by or on behalf of my candidacy or committee for this calendar year to exceed \$3,500. I understand that this form must be filed no later than seven calendar days after receiving a contribution or making an expenditure in the calendar year. I also understand that if the committee exceeds \$3,500 in total contributions or total expenditures during the calendar year, detailed transaction information must be filed electronically using ORESTAR for the calendar year not later than seven calendar days after exceeding the \$3,500 threshold.

Candidate Attestation
By signing this document, I acknowledge that I am personally liable for any penalties imposed under ORS Chapter 260 and the information on the form is true and correct.

[Signature] Date Signed June 7, 2014

RECEIVED JUN 4 2014 BY: [Signature]

Treasurer's Attestation if different than Candidate
By signing this document, I attest that the information on the form is true and correct and I acknowledge that if I am a treasurer for a political action or petition committee I am personally liable for any penalties imposed under Chapter 260.

Treasurer's Signature _____ Date Signed _____

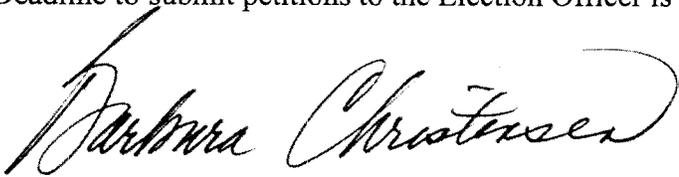
CITY OF ASHLAND

June 4, 2014

Stefani Seffinger
448 Taylor Street
Ashland OR 97520

A prospective petition has been completed and filed with the City Recorder's Office for City Council Position #4.

Petition ID CC-4 has been approved for circulation to obtain the required 25 signatures for this position. Deadline to submit petitions to the Election Officer is August 21, 2014.



Barbara Christensen
City Recorder



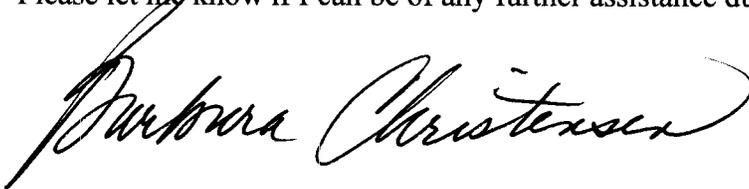
CITY OF
ASHLAND

June 12, 2014

Stefani Seffinger
448 Taylor Street
Ashland OR 97520

A completed petition, with the required signature sheets properly certified by the county elections office has been received and is filed with the City Recorder's Office for City of Ashland Councilor Position #4.

Please let me know if I can be of any further assistance during this upcoming election time.



Barbara Christensen
City Recorder/Treasurer



Petition Submission
Candidate, Voters' Pamphlet

SEL 338

rev 01/14
OAR 165-010-0005, 165-014-0005

This form must be completed and filed with each submittal of signatures.

Filing Officer

State County for both county and district petitions City

Election Type

Year

Primary General Special Election 2014 2016 2018

Petition Information

Candidate Name or Measure Number

Stefani Seffinger

Type of Filing

Number of Signatures Submitted

Candidate Nominating Petition

50

Voters' Pamphlet, Candidate

Voters' Pamphlet, Measure

Candidate

→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name

Contact Phone

Email Address

Stefani Seffinger

(541) 324-6414

stefseffinger@yahoo.com

Signature

Date Signed

(Stefani Seffinger)

June 12 2014

Measure Argument Filer

→ By signing this document, I hereby state that all information on the form is true and correct to the best of my knowledge.

Name

Contact Phone

Email Address

Signature

Date Signed

RECEIVED
JUN 12 2014

BY: _____

County: JACKSON
User Name : Connor, Donna

Petition Processing Statistics Report

Date : 6/12/2014 3:12:13 PM

Number :2014Ash-03 Title :Ashland City Council, Pos 4 - Stefani Seffinger

Petition Information

Petition Name : Ashland City Council, Pos 4 - Stefani Seffinger

Petition Date : 06/12/2014

Date Filed : 06/12/2014

End Circulation Date : 06/12/2014

Minimum Signatures Required : 25

Accepted Of Minimum : (184.00%)

Total Signatures Processed : 50

Processing Summary Sample: All

Total Accepted Signatures : 46 (92%) **Of Those Processed**

Total Rejected Signatures : 4 (8%) **Of Those Processed**

Accepted Reason	Total	(% Rejected)
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Valid Signature	46	(100%)
-----------------	----	--------

Rejected Reason	Total	(% Rejected)
-----------------	-------	--------------

Out of City	1	(25%)
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Signatures Do Not Match	3	(75%)
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Candidate Signature Sheet | Nonpartisan

Petition ID CC4

Signatures for this petition are being gathered by PAID Circulators VOLUNTEER Circulators

This is a candidate nominating petition. Signers of this page must be active registered voters in the county listed.

i Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer. Candidates should allow ample time for the verification process to be completed before 5pm on the filing deadline day.

County Jackson

Candidate Information	
Name Stefani Seffinger	Office City Council
Election 2014 General Election	District or Position Number Position #4

To the Secretary of State of Oregon/County Elections Official/City Recorder, We the undersigned voters, request the candidate's name be placed on the ballot at the election listed above for nomination to the office indicated.

i Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
✓ 1 Annette Lewis	6/7/14	ANNETTE LEWIS	647 Ashby Blvd.
✓ 2 William Heiman	6/7/14	WILLIAM HEIMANN	647 RISKY (BLVD)
✓ 3 David Ferguson	6/7/14	DAVID FERGUSON	143 Oak Meadows Pl Ashland
✓ 4 Avram Chetron	6/7/14	Avram Chetron	2007 Tamarack Pl., Ashland
✓ 5 Louise A. Goldby	6/7/14	Louise A. Goldby	260 Greenman Pl Ashland
✓ 6 Nancy Kramarenko	6/7/14	Nancy Kramarenko	258 A ST STEI-32 Ashland
✓ 7 Judith A. Kloetzel	6/7/14	Judith A. Kloetzel	351 Wiley Ave. Ashland.
✓ 8 John Arthur Kloetzel	6/7/14	John Arthur Kloetzel	351 Wiley Ave, Ashland
✓ 9 Jean Conger	6/7/14	Jean Conger	370 Glenn St Ashland
✓ 10 Elaine Sweet	6/7/14	Elaine Sweet	150 Manzanita St, Ashland

Circulator Certification This certification must be completed by the circulator and additional signatures should not be collected on this sheet once the certification has been signed and dated!

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 person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Annette Lewis
Circulator Signature

6/7/14
Date Signed mm/dd/yy

2
Sheet Number

Sheet will be numbered by group submitting the petition.

Annette Lewis
Printed Name of Circulator

647 Ashby Blvd
Circulator's Address street, city, zip code

Candidate Signature Sheet | Nonpartisan

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Election 2014 General Election	District or Position Number Position #4

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Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
✓ 1 <i>Susan Dyssegard</i>	6/4/14	Susan S. Dyssegard	1330 Tolman Creek Rd Ashland 97520
✓ 2 <i>Lori Ainsworth</i>	6/4/14	LORI AINSWORTH	928 Beswick Way Ashland 97520
✓ 3 <i>Jeffrey K. McFarland</i>	6/4/14	Jeffrey McFarland	91 Nursery St., Ashland, OR. 97520
✓ 4 <i>Amanda Glass</i>	6/4/14	Amanda Glass	40 Van Ness, Ashland 97520
✓ 5 <i>Sherri L Deckelman</i>	6/4/14	Sherri L Deckelman	1447 E. Main St. Ashland, OR 97520
✓ 6 <i>Maryde Bombick</i>	6/5/14	MARYDEE BOMBICK	421 PRIMST. ASHLAND OR 97520
NM 7 <i>[Signature]</i>	6/5/14	THOMAS JOHNSON	177 Taylor St. Ashland, OR 97520
✓ 8 <i>Francis B. Peckham</i>	6/6/14	FRANCIS B. PECKHAM	315 Oak St. Ashland, 97520
✓ 9 <i>Elizabeth J. Eggers</i>	6/6/14	Elizabeth J. Eggers	221 Granite St. Ashland 97520
✓ 10 <i>Daniel Seffinger</i>	6/6/14	DANIEL J SEFFINGER	448 TAYLOR ST. Ashland 97520

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Stefani Seffinger _____ 6/6/14 _____ 3
 Circulator Signature Date Signed mm/dd/yy Sheet Number

Stefani Seffinger _____ 448 Taylor Street Ashland _____
 Printed Name of Circulator Circulator's Address street, city, zip code Oregon 97520

Candidate Signature Sheet | Nonpartisan

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Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
✓ 1 <i>Ronald J. Bombick</i>	6/8/14	RONALD J. BOMBICK	421 PRIM ST, ASHLAND, 97520
✓ 2 <i>Skye G. Sugar</i>	6/8/14	SKYE G. SUGAR	177 Westwood St, Ashl 97520
✓ 3 <i>David Sugar</i>	6/8/14	DAVID SUGAR	177 Westwood St., Ashland 97520
✓ 4 <i>Felising N. Bietz</i>	6/8/14	FELISING N. BIETZ	924 KESTREL PARKWAY, Ashland 97520
✓ 5 <i>Donald C Bietz</i>	6/8/14	DONALD C BIETZ	924 Kestrel " " "
✓ 6 <i>Cheryl French</i>	6/9/14	Cheryl French	453 Taylor St, Ashland 97520
✓ 7 <i>Charles H Whitaker</i>	6/9/14	Charles H Whitaker	453 Taylor St Ashland
✓ 8 <i>Deborah L Holden</i>	6/10/14	Deborah L Holden	564 Ashland St. Ashland 97520
✓ 9 <i>Sherrill D Morgan</i>	6/10/14	Sherrill D Morgan	484 Euclid St., Ashland 97520
✓ 10 <i>Marlyn Louise Barrick</i>	6/10/14	Marlyn Louise Barrick	509 Euclid St, Ashland, 97520

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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 person is a voter qualified to sign the petition (ORS 249.061). I also hereby certify that compensation I received, if any, was not based on the number of signatures obtained for this petition.

Marlyn Louise Barrick 6/10/14
Circulator Signature Date Signed mm/dd/yy

Marlyn Louise Barrick 509 Euclid St, Ashland 97520
Printed Name of Circulator Circulator's Address street, city, zip code

4
Sheet Number
Sheet will be numbered by group submitting the petition.

Candidate Signature Sheet | Nonpartisan

Petition ID CC4

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County Jackson

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Election 2014 General Election	District or Position Number Position #4

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Signers must initial any changes the circulator makes to their printed name, residence address or date they signed the petition.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code
✓ 1 <i>Charles L Eren</i>	6-10-14	Charles L Eren	94 N 3rd St Ashland 97520
✓ 2 <i>Patricia J. Acklin</i>	6/10/14	Patricia J. Acklin	270 Scenic Dr. Ashland 97520
✓ 3 <i>Sandra Slattery</i>	6/11/14	Sandra Slattery	1405 Pinecrest Ter. Ashland 97520
OC 4 <i>Roshan Smith</i>	6/11/14	Roshan Smith	255 Deborah Dr. Ashland Talent OR 97546
✓ 5 <i>Vanston Shaw</i>	6/11/14	Vanston Shaw	180 LITHIA WAY #208 Ashland 97520
✓ 6 <i>Pamela P. Lucas</i>	6/11/14	PAMELA P. LUCAS	420 TAYLOR ST. ASHLAND 97520
✓ 7 <i>Sherman L. Lucas</i>	6/11/14	SHERMAN L. LUCAS	420 TAYLOR ST. ASHLAND 97520
✓ 8 <i>Alice Mallory</i>	6/11/14	Alice Mallory	438 Taylor St. Ashland OR 97520
✓ 9 <i>Barbara A. Jarvis</i>	6/12/14	BARBARA A. JARVIS	1159 Emma, Ashland, OR 97520
✓ 10 <i>Thomas B Kennedy</i>	6-12-14	Thomas B Kennedy	209 Crowsen Rd. Ashland, OR 97520

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Daniel Seffinger 6/12/14
Circulator Signature Date Signed/mm/dd/yy

5

Sheet Number

DANIEL J SEFFINGER 448 Taylor St Ashland OR 97520
Printed Name of Circulator Circulator's Address street, city, zip code

Sheet will be numbered by group submitting the petition.