Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 02/23 ORS 249.031

Filing Dates			Candidate	Filing	Candidate	Withdrawal
Primary Election May 21, 2024	First Day to Fill Last Day to Fill		September March 12,	•	March 15, 2	2024
General Election November 5, 2024	First Day to Fil Last Day to Fil		June 5, 202 August 27,		August 30,	2024
Filing Information						FILED
This filing is an	Original		Amend	ment		CLO
Office Information						3EF 1 4 2023
Filing for Office of: Assesso	r				C	HRISTY BIGGS OUNTY CLERK
District, Position or County: Til	lamook Co	unty				CLERK
Party Affiliation:		Democratic F	arty	Republican P	arty 🔳 N	lonpartisan
Incumbent Judge (for judicial ca	indidates only):	Yes		☐ No		londisclosure on file
Filing Method						
Fee						
Office United States President United States Vice President United States Senator United States Representative Statewide Offices State senator or Representative Circuit Court Judge	Filing Fee n/a n/a \$150 \$100 \$100 \$25 \$50		Office District Atto County Judg MSD Execut MSD Counci County Offic City Office Justice of th	e ive Officer, MAD Direc lor ce	\$25 \$50	rter or ordinance
Prospective Petition, in lieu	of filing fee		Some circu	lators may be paid	Yes	☐ No
Candidate Information						
Name of Candidate						
First KoCondro	MI	Last			Suffix	
KaSandra	J	Larso	<u>n</u>			
How you would like your name		e ballot				
KaSandra Larso	n					
Candidate Residence / Route A	Address					
Street Address		City		State	Zip	County
14500 Trask R	iver Rd	Tillan	nook	OR	9714	1
Candidate Mailing Address and	d Contact Inform	ation Only one pho	ne number and	l an email is required.		
Street Address or PO Box		City		State	Zip	
14500 Trask R	iver Rd	Tillan	nook	OR	9714	1
Work Phone	Home Phone		Cell Phone	!	Fax	
503-842-3400			503-8	312-7114		
Email Address				if applicable		
votekasandralars	son@out	look.com				
Race and Ethnicity Optional						<u></u>

Occupation (present employment) If not employed, enter "Not Employed".

Chief Deputy Assessor & Tax Collector, Tillamook County Assessment & Taxation

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

Property Appraiser 3/Sales Data Analyst & Lead Residential Appraiser Tillamook County 12/2011- 06/2017

Property Appraiser 1 & 2 Tillamook County 12/2004 - 11/2011

Educational Background (schools attended)			
Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
University of Oregon		Bachelor of Science	Psychology
Chemeketa Community College		Associates	Arts of Oregon Transfer
Chemeketa Community College		Associates	General Studies
Tillamook Highschool		Diploma	General

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

Over 560 hours of required continuing education as a registered county appraiser. Over 90 hours of required management education as Chief Deputy Assessor & Tax Collector.

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

21 years of working in the Tillamook County Assessment & Taxation office

Vice President - Oregon Association of County Tax Collectors

District 2 Chair - Oregon Association of County Tax Collectors

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.

Candidate Attestation

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). Does not apply to candidates filing for the office of US President.



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)

SIGNATURE REMOVED BY
COUNTY CLERK

Candidate Signature

9-14-2023

Date



Department of Revenue

955 Center St NE Salem, OR 97301-2555 www.oregon.gov/dor

August 22, 2023

KaSandra Larson 14500 Trask River Road Tillamook OR 97141 kasandralarson78@outlook.com

VIA EMAIL

RE: Oregon Assessor Eligibility Questionnaire

Dear Ms. Larson:

On August 17, 2023, the Oregon Department of Revenue, Property Tax Division, received your Assessor Eligibility Questionnaire. On your application you indicate that you are seeking election to the Tillamook County Assessor position in 2024.

The Department has reviewed your application and determined that you have met the eligibility requirements.

If you have any questions, please contact Gregg Thummel at (503) 428-1373, or via email at ptd.programassistance@dor.oregon.gov.

Sincerely,

Jason Brockie, Section Manager Support, Assistance, Oversight

Jason Brockis

Property Tax Division

Oregon Department of Revenue

cc: Tillamook County Clerk

Attachment (1)



ASSESSOR ELIGIBILITY QUESTIONNAIRE

Department of Revenue use only					
Date received					
8/17/2023					
Approved X Gregg Thummel	Digitally signed by Gregg Thurmel Data 2023 08 22 14 39 27 -0700				
Signature/title	· · · · · · · · · · · · · · · · · · ·				

This questionnaire is used by the Department of Revenue to establish eligibility for appointment or election to the office of county assessor (see ORS 204.016(5)). Please complete this questionnaire and return it to the address shown below. Once submitted, please allow two weeks for the Department of Revenue to determine your eligibility and, if required, to notify the appropriate county clerk's office.

Nar					
	Sandra Larson	lau.	In	Inc.	
,		State	97141	ZIP Code 97141	
Em	 -	-			
ka:	sandralarson78@outlook.com				
				Yes (✓)	No (✓)
1.	. Are you a qualified elector under the Oregon Constitution? (See Qualifications of Electors below)				
2.	Have you been a resident of the county in which you are seeking election to the office of county assessor for a period of one year preceding the election? (Not applicable for appointed assessors)				
3.	. Are you a registered appraiser under ORS 308.010?			<i>v</i>	
4.	Are you an appraiser trainee under ORS 308.	015?	•••••		
5.	i. Has the Department of Revenue previously determined that you are eligible for appointment or election to the office of county assessor?*				~
6.	In which county are you seeking appointment	t or election? Tillamook			
7.	In which calendar year are you seeking appoint	intment or election? 2024			
	you answered "Yes" to question 5, you do no t and return this questionnaire to the address pro		d 3. Sign and date	e the bottom	of page
	ou answered "No" to question 5, complete pa ted questionnaire to the address provided belo		bottom of page 3,	and return th	ne com-

Oregon Constitution, Article II, Section 2 Qualification of Electors

- (1) Every citizen of the United States is entitled to vote in all elections not otherwise provided for by this constitution if such citizen:
 - (a) Is 18 years of age or older;
 - (b) Has resided in this state during the six months immediately preceding the elections, except that provision may be made by law to permit a person who had resided in this state less than 30 days immediately preceding the election, but who is otherwise qualified under this subsection, to vote in the election for candidates for nomination or election for President or Vice President of the United States or elector of President or Vice President of the United States; and
 - (c) Is registered prior to the election in the manner provided by law.

Return your completed questionnaire to: ptd.programassistance@dor.oregon.gov

Assessor Eligibility Questionnaire			Page 2
_	art I; then sign, date, and re	e of a county assessor? turn this questionnaire to the turn this questionnaire to the	
PART I (complete only if you answ	vered "yes" above)		
Location of county assessor's office	Dates of employment	Your title	Supervisor name
Tillamook County	10/28/2002	Chief Deputy Assessor/Tax	Denise Vandecoevering
years of office and accounting expe	no have not had two years of full		sessor's office must have at least two plete the following sections in detail.
Employer name and address			Dates of employment
Your title	2.8///	Supervisor name	
Description of accounting duties			
<u> </u>			***
2			<u>s</u>
	<u> </u>		
	100		
Description of management duties			
	2.444		
		5.65-71	
	3 375		
	72. 9		
		2 392 1922	
			<u> </u>
			
Use the next	page for additional employers	f you need more space, attach a	additional pages.

Assessor Eligibility Questionnaire		Page 3
PART II (continued)		•
Employer name and address	Dates of employment	
-		
Your title		
Description of accounting duties		
Description of management duties		1977
Employer name and address		Dates of employment
Your title	Supervisor name	
Description of accounting duties	1	
Description of management duties		
T		
		Pol 27 G 2
Signature KaSandra Larson Digitally signed by KaSandra Larson Date; 2023.08.16 08:15:14-07'00'		Date 08/16/2023
		•