

#37

COMPLETE

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City of Portland
ELECTIONS OFFICE

8:00 am, Feb 7, 2022

Page 1: Candidate Information

Q1 Original

This form is filed as an:

Q2

First name

Sandeep

Q3 Respondent skipped this question

Middle initial

Q4

Last name

Bali

Q5 Respondent skipped this question

Suffix

Q6

Name should appear on ballot as follows (nicknames or shortened versions of names in parenthesis):

Sandeep Bali

Page 2: Candidate Information

Q7 Commissioner, Position No. 2

I am filing to be a candidate for the following office:

Q8

No

Are you filing as the current incumbent?

Page 3: Candidate Information: Residential and Mailing Addresses

Q9

Candidate Residence / Route Address

Street address line 1

[REDACTED]

City

[REDACTED]

State

[REDACTED]

Zip code

[REDACTED]

County

[REDACTED]

Q10

Please use my residential address as my mailing address.

Candidate Mailing Address

Q11

Candidate Mailing Address (if different than residential address)

Street address line 1

[REDACTED]

City

[REDACTED]

State

[REDACTED]

Zip code

[REDACTED]

Page 4: Candidate Contact Information

Q12

Primary phone number

[REDACTED]

Q13

Respondent skipped this question

Alternate phone number

Q14

Respondent skipped this question

Campaign phone number

Q15 Respondent skipped this question

Campaign website

Q16 Respondent skipped this question

Email address 1

[REDACTED]

Q17 Personal email address

This email address is:

Q18 Respondent skipped this question

Email address 2

Q19 Respondent skipped this question

This email address is:

Page 5: Candidate Information: Demographic Information

Q20 Asian or Asian American

Race or Ethnicity (Please check all that apply)

Page 6: Candidate Information: Demographic Information

Q21 Respondent skipped this question

Please provide your Tribe or Native Corporation, if desired:

Page 7: Required Background Information

Q22 Occupation (present employment, paid or unpaid). If not employed, enter "Not Employed."

Clinical Pharmacist - Clinical Operations Manager for HIV/AIDS Specialty pharmacy.

Next Level Scholarship Foundation - Founder of non-profit organization with a mission to provide individuals from a diverse background with the resources and support necessary to move forward with their educational goals.

Candidate Filing Application

Q23

Occupational Background (previous employment, paid or unpaid). If no relevant experience, enter "None" or "NA."

Staff Pharmacist - Providence Health & Services. Long Term Care Pharmacy specializing in geriatric care. Portland, OR

Clinical Report Writer - Charles River Laboratories. Reno, NV

Assistant Professor - College of Agriculture, Biotechnology, and Natural Resources. University of Nevada Reno. Reno, NV.

Q24

Prior Government Experience (elected or appointed). If no government experience, enter "None" or "NA."

N/A

Q25

Educational Background

Complete name of school

Pacific University School of Pharmacy

Last grade completed

Doctorate Program

Diploma/Degree/Certificate

PharmD - Doctorate in Pharmacy

Course of study (optional)

Pharmacy

Q26

Additional Educational Background

Complete name of school

University of Nevada Reno

Diploma/Degree/Certificate

Bachelors of Science

Q27

Respondent skipped this question

Additional Educational Background

Q28

Respondent skipped this question

Additional Educational Background

Q29

Respondent skipped this question

Educational Background (other)

Q30

No

Do you have additional schools to add?

Page 8: Background Information: Additional Schools

Q31 Respondent skipped this question

Additional Educational Background

Q32 Respondent skipped this question

Additional Educational Background

Q33 Respondent skipped this question

Additional Educational Background

Q34 Respondent skipped this question

Additional Educational Background

Q35 Respondent skipped this question

Additional Educational Background

Q36 Respondent skipped this question

Additional Educational Background

Page 9: State Campaign Finance Information

Q37 I have reviewed the above candidate and campaign reporting requirements for the State of Oregon.

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). Please acknowledge:

Q38

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 State Campaign Finance Manual for the procedural and legal requirements of establishing and maintaining a candidate committee. Please acknowledge:

I have reviewed the above candidate and campaign reporting requirements for the State of Oregon.

Page 10: City Campaign Finance Information

Q39

City of Portland specific campaign finance reporting requirements for candidates and campaigns are listed in City Code Sections 2.10.010 B. 1., 2., and 4., 2.10.020 B., 2.10.030 A.–C., 2.16.140 C., 2.16.140 D. Please acknowledge:

I have reviewed the above candidate and campaign reporting requirements that are specific to the City of Portland.

Page 11: Candidate Committee

Q40

Select one:

I have a candidate committee registered with the Oregon Secretary of State in ORESTAR. Name of Candidate Committee as listed in ORESTAR: :
Friends of Sandeep Bali

Page 12: Small Donor Elections Program

Q41

Select one:

I do not plan to participate in the City's public funding program (Small Donor Elections Program).

Page 13: Filing Options

Q42

Fee (\$30)

I am choosing the following option to file for candidacy (select one):

Page 14: Filing by Declaration and Fee

Q43

Please acknowledge:

I am filing this Candidate Filing Application (Declaration of Candidacy) along with the required filing fee pursuant to City Code Section 2.08.070. I understand that my filing for candidacy is not complete until the City Elections Office receives full payment of the filing fee.

Q44

Filing fee payment method (select one):

I am including the required fee with this Candidate Filing Application (Declaration of Candidacy) by submitting my payment through the Online Payment Portal.

Page 15: Filing by Declaration and Nominating Petition

Q45

Please acknowledge:

Respondent skipped this question

Q46

Some circulators may be paid:

Respondent skipped this question

Q47

Please upload Candidate Signature Sheet (SEL 121 Form)

Respondent skipped this question

Q48

Please acknowledge:

Respondent skipped this question

Page 16: Certification Requirement for Auditor Candidates

Q49

Select one:

I am not running as a candidate for City Auditor.

Page 17: Certification Requirement for Auditor Candidates

Q50

Please acknowledge:

Respondent skipped this question

Q51

Respondent skipped this question

City Auditor candidate applicants may upload proof of certification below if not submitting certification by email or in person.

Page 18: Filing Submission

Q52

By checking the boxes below:

I affirm that I read and understand the statements above.

,

I represent that I am the individual whose information is provided as the person submitting this candidate filing form.

,

I represent that all the information provided by me on this form is true to the best of my knowledge.

,

I affirm my understanding that the information submitted on this form is subject to Oregon's public record laws.

Q53

Signature

By checking this box, I am attaching my electronic signature to this Online Candidate Filing Application (AUD 120 Form – Declaration of Candidacy).
