

Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 09/25
ORS 249.031

Filing Dates		Candidate Filing	Candidate Withdrawal
Primary Election May 19, 2026	First Day to File Last Day to File	September 11, 2025 March 10, 2026*	March 13, 2026
General Election November 3, 2026	First Day to File Last Day to File	June 3, 2026 August 25, 2026*	August 28, 2026

*An incumbent seeking re-election to the same office must file their declaration of candidacy or nominating petition at least seven days before applicable filing deadline for non-incumbent candidates. Incumbent candidates that were appointed to the position they are seeking election to are subject to the same filing deadline as non-incumbent candidates.

Filing Information

This filing is an Original Amendment

Office Information

Filing for Office of: COUNTY CLERK

District, Position or County: COOS

Party Affiliation: Democratic Party Republican Party Nonpartisan

Incumbent: No Yes If Incumbent: Elected** Appointed

**If you are an Elected Incumbent, you are subject to an earlier filing deadline!

Filing Method

Fee

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

Prospective Petition, in lieu of filing fee Some circulators may be paid Yes No

Candidate Information

Name of Candidate

First PAMELA MI E Last LEWIS

How you would like your name to appear on the ballot

PAM LEWIS

Candidate Residence / Route Address

Street Address 94386 MCNEELY LN City COQUILLE State OR Zip 97423 County COOS

Candidate Mailing Address and Contact Information Only one phone number and an email is required.

Street Address or PO Box 94386 MCNEELY LN City COQUILLE State OR Zip 97423

Work Phone Home Phone Cell Phone 541.396.4348

Email Address p.lewis2373@gmail.com Web Site, if applicable lewis4clerk.org

Race and Ethnicity Optional

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

REGISTERED NURSE

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

EMT-I SUPERVISOR, 30 YEARS
ER RN, CHG NURSE, PRISON CONTRACT NURSE,
JAIL NURSE, FAIRBOARD, WORSHIP LEADER

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
CHS	12	DIPLOMA	H.S.
SWOCC - AAS-RN	AA DEGREE	RN	NURSING

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

CLASSES, TEACH SIGN LANGUAGE BEGINNERS CLASS,
RAN FOR C.C. COMMISSIONER

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

PCP

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 \$1,500 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.

Residence Address Exemption

To exempt your residence address from public disclosure, complete form [SEL 180 - Residence Address Exemption Request](#). The request for a Residence Address Exemption MUST include a publicly disclosable mailing address. See the Candidates Manual for further information.

I don't want my residence address to be disclosed. I will be filing a separate [SEL 180 - Residence Address Exemption Request](#).

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)

Candidate Signature

Date

3.6.26