

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: City Council

District, Position or County: City of Medford - Ward 1

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 Brian MI N. Last Siothun

How you would like your name to appear on the ballot

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<u>2365 Petunia St.</u>	<u>Medford</u>	<u>OR.</u>	<u>97504</u>	<u>Jackson</u>

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

Street Address or PO Box	City	State	Zip
<u>2365 Petunia St.</u>	<u>Medford</u>	<u>OR</u>	<u>97504</u>

Work Phone	Home Phone	Cell Phone
<u>541-690-5711</u>	<u>541-690-5711</u>	<u>541-690-5711</u>

Email Address	Web Site, if applicable
<u>bns1616@hotmail.com</u>	

Race and Ethnicity Optional

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

Business Owner - Consultant

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

City of Medford 2004-2024

City of Woodburn 1988-2004

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Golden Gate Univ.		Masters	Public Admin.
Warner Pacific College		B.A.	Business

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

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

Hubbard City Council

Campaign Finance Information Not applicable to candidates for federal office.

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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

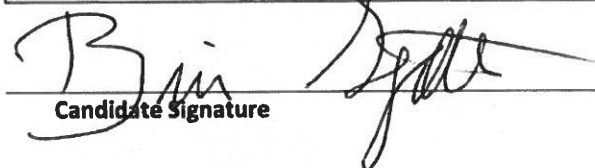
By signing this document, I hereby state that:

- 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

6-27-2026
Date

Candidate Filing
Major Political Party or Nonpartisan

SEL 101

rev 09/25
ORS 249.031

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Filing Information

This filing is an ☒ Original ☐ Amendment

Office Information

Filing for Office of: *City Council*

District, Position or County: *City of Medford Ward 2*

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
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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 *Christopher* MI *T* Last *Ryan*

How you would like your name to appear on the ballot
Chris Ryan

Candidate Residence / Route Address

Street Address *603 Plum St* City *Medford* State *OR* Zip *97501* County *Jackson*

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

Street Address or PO Box *603 Plum St* City *Medford* State *OR* Zip *97501*

Work Phone *541-727-8524* Home Phone *541-301-3039* Cell Phone *541-301-3039*

Email Address *rarehinges@gmail.com* Web Site, if applicable *N/A*

Race and Ethnicity Optional

Continued on page 2 of this form

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

Property Restoration

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

Construction

Educational Background (schools attended)

Complete name of School

Last Grade completed

Diploma/Degree/Certificate

Course of Study

South Eugene HS

12

N/A

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

Trade School - Haz-Mat Inspection

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

N/A

Campaign Finance Information Not applicable to candidates for federal office.

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

Candidate Attestation

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Candidate Signature

8-3-26

Date

Candidate Filing
Major Political Party or Nonpartisan

SEL 101

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ORS 249.031

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Filing Information

This filing is an ☒ Original ☐ Amendment

Office Information

Filing for Office of: CITY COUNSELOR

District, Position or County: CITY OF MEADOW LAKE

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 MICHAEL MI J Last WILLIAMS

How you would like your name to appear on the ballot

MICHAEL WILLIAMS

Candidate Residence / Route Address

Street Address 1941 MCKEZZIE DR City MEADOW LAKE State OR Zip 97001 County JACKSON

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

Street Address or PO Box _____ City _____ State _____ Zip _____

Work Phone 503-983-3341 Home Phone 318-614-7607 Cell Phone 318-237-4522

Email Address MWILLIAMS.ELECTION@GMAIL Web Site, if applicable _____

Race and Ethnicity Optional BLACK

Continued on page 2 of this form

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

HEMP INSPECTOR, OREGON DEPT OF AG

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

AGRICULTURE / CTEF / SMALL BUSINESS OWNER / CORRECTIONS

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
QUANITA PARKER JR	12	DIPLOMA	
RICHLAND STATE UNIVERSITY		B.S.	RESEARCH / AGRICULTURE

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

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

MEDFORD SCHOOL BOARD

Campaign Finance Information Not applicable to candidates for federal office.

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Candidate Attestation

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Candidate Signature

Date

07/16/2026

Candidate Filing

Major Political Party or Nonpartisan

SEL 101

rev 09/25
ORS 249.031

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Filing Information	
This filing is an	☒ Original ☐ Amendment
Office Information	
Filing for Office of:	City Councilor
District, Position or County:	City of Medford 1
Party Affiliation:	☐ Democratic Party ☐ Republican Party ☒ Nonpartisan
Incumbent:	☒ No ☐ Yes If Incumbent: ☐ Elected** ☐ Appointed

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Filing Method			
☐ Fee			
Office	Filing Fee	Office	Filing Fee
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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 Filiberto	Last Vargas
How you would like your name to appear on the ballot Dr. Beto Vargas	
Candidate Residence / Route Address	
Street Address 1619 Prune st	City Medford
State OR	Zip 97501
County Jackson	
Candidate Mailing Address and Contact Information Only one phone number and an email is required.	
Street Address or PO Box	City
State	Zip
Work Phone	Home Phone
Cell Phone 541 227-1399	
Email Address fvargas48@gmail.com	Web Site, if applicable
Race and Ethnicity Optional Latino	

Continued on page 2 of this form

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

Director of Education Services at Kids Unlimited Academy

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

Education (KU)

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
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Bowdoin College

BA

Arizona State University

~~MED~~ MEd

University of San Diego

PhD

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

Secondary & Higher Education

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

None

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Candidate Signature

Date

8/6/20

Candidate Filing
Major Political Party or Nonpartisan

SEL 101

rev 09/25
ORS 249.031

Filing Dates		Candidate Filing		Candidate Withdrawal	
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Filing Information					
This filing is an ☒ Original ☐ Amendment					
Office Information					
Filing for Office of: Medford City Councilor					
District, Position or County: Ward 3					
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			
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☒ Prospective Petition, in lieu of filing fee		Some circulators may be paid ☐ Yes ☒ No	

Candidate Information				
Name of Candidate				
First Abigail	MI R.	Last Mace		
How you would like your name to appear on the ballot				
Abigail Mace				
Candidate Residence / Route Address				
Street Address 710 Ellen Avenue	City Medford	State OR	Zip 97501	County Jackson
Candidate Mailing Address and Contact Information Only one phone number and an email is required.				
Street Address or PO Box 710 Ellen Avenue	City Medford	State OR	Zip 97501	
Work Phone	Home Phone	Cell Phone 406-381-5792		
Email Address mace4medford@gmail.com	Web Site, if applicable		RECEIVED	
Race and Ethnicity Optional		AUG 04 2026		
CITY RECORDER'S OFFICE				

Continued on page 2 of this form

RECEIVED

AUG 04 2026

CITY RECORDER'S OFFICE

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

Director & Harpsichordist, Jefferson Baroque Orchestra
Keyboardist, Rogue Valley Symphony

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

Music Instructor, Rogue Community College
Substitute Teacher, Grace Cascade Christian Schools
Assistant Professor of Music and Director of the Preparatory Dept., Oklahoma Baptist University

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
The University of Texas at Austin	NA	Doctor of Musical Arts	Piano Performance
The University of Texas at Austin	NA	Master of Music	Piano Performance
Vanderbilt University	NA	Bachelor of Music	Piano Performance

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

Netherland-America Foundation Fulbright Fellow, The Royal Conservatory of The Hague

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

NA

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Angail Mace
Candidate Signature

August 4, 2026
Date

Candidate Filing
Major Political Party or Nonpartisan

SEL 101

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ORS 249.031

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Filing Information

This filing is an ☒ Original ☐ Amendment

Office Information

Filing for Office of: City Councilor

District, Position or County: City of Medford Ward 3

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
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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 KEVIN MI H Last STINE

How you would like your name to appear on the ballot

Kevin Stine

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<u>2343 Finch Lane</u>	<u>Medford</u>	<u>OR</u>	<u>97501</u>	<u>Jackson</u>

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

Street Address or PO Box	City	State	Zip
<u>2343 Finch Lane</u>	<u>Medford</u>	<u>OR</u>	<u>97501</u>

Work Phone _____ Home Phone _____ Cell Phone (541) 301-7062

Email Address <u>info@kevinstine.com</u>	Web Site, if applicable <u>www.kevinstine.com</u>
Race and Ethnicity Optional	

Continued on page 2 of this form

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

US Navy Military Honors

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

US Navy Submarine Service (2004-2013)
ACCESS Homeless Veterans Service

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Southern Oregon University		BS	Political Science

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

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

Medford City Council (2015-Present)
Medford Urban Renewal Agency (2015-Present)

Campaign Finance Information Not applicable to candidates for federal office.

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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**
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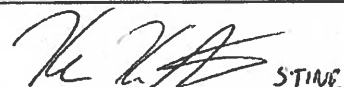
For Major Political Party Candidates

- 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

13 JUL 2026
Date

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: City Councilor

District, Position or County: City of Medford Ward 4

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 Nicholas MI K Last Card

How you would like your name to appear on the ballot

Nick Card

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<u>1134 Riverrock Way</u>	<u>Medford</u>	<u>OR</u>	<u>97504</u>	<u>Jackson</u>

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

Street Address or PO Box	City	State	Zip

Work Phone	Home Phone	Cell Phone
<u>541 500 6166</u>		

Email Address	Web Site, if applicable
<u>nick@eketnickcard.com</u>	

Race and Ethnicity Optional

Continued on page 2 of this form

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

Combined Transport, Inc. VP Operations

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

N/A

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
South Medford HS	12	HS Diploma	
Harvey Mudd College	16	BS Engineering	

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

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

Medford City Councilor

Campaign Finance Information Not applicable to candidates for federal office.

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Candidate Signature

Date

7/2/26

Candidate Filing
Major Political Party or Nonpartisan

SEL 101

rev 09/25
ORS 249.031

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Incumbent: ☒ No ☐ Yes If Incumbent: ☐ Elected** ☐ Appointed

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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 Alan MI William Last Jackson

How you would like your name to appear on the ballot

Alan Jackson

Candidate Residence / Route Address

Street Address	City	State	Zip	County
<u>602 N Modoc Ave</u>	<u>Medford</u>	<u>OR</u>	<u>97504</u>	<u>Jackson</u>

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

Street Address or PO Box	City	State	Zip
<u>602 N. Modoc Ave</u>	<u>Medford</u>	<u>OR</u>	<u>97504</u>

Work Phone	Home Phone	Cell Phone
<u>541-601-1715</u>	<u>541-601-1715</u>	<u>541-601-1715</u>

Email Address Alanwjackson@hotmail.com Web Site, if applicable jacksonbills@gmail.com

Race and Ethnicity Optional

Continued on page 2 of this form

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

Teacher, Rogue Community College

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

Chief Information Officer,
Director of Cyber Security Services

Educational Background (schools attended)

Complete name of School	Last Grade completed	Diploma/Degree/Certificate	Course of Study
Whitworth University	Bachelors		Education
Southern Oregon University		MBA	Business

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

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

n/a

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Candidate Signature

Date

7/30/26