

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: **Mayor**

District, Position or County: **City**

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 **Carol** MI **E** Last **MacInnes**

How you would like your name to appear on the ballot

Carol MacInnes

Candidate Residence / Route Address

Street Address	City	State	Zip	County
1487 Adams	Fossil	OR	97830	Wheeler

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

Street Address or PO Box	City	State	Zip
PO Box 524	Fossil	97830	

Work Phone Home Phone Cell Phone **541-993-1211**

Email Address **queeniemac3@icloud.com** Web Site, if applicable

Race and Ethnicity Optional

Continued on page 2 of this form

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

Not Employed

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

Business Manager, Emergency Management

Educational Background (schools attended)

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

Mayor 10 years, Councilor 2 years

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

07/18/2026

Date

Candidate Signature Sheet | Major Party | Local

☒ SOME Circulators ☒ No Circulators for this petition are being paid.

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

Signatures must be verified by the appropriate county elections official before the petition can be filed with the filing officer.

Petition ID

2026-M-01

County

Waukegan

Candidate Information

Name	Carol MacInnes	Office	Mayor
Party	City of Fossil Mayor		

To the Elections Official/Filing Officer, We the undersigned voters, as members of the party listed above, request the candidate's name be placed on the ballot at the next primary election following the filing of this petition for nomination to the office indicated.

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

It is against the law for signers to sign another person's name under any circumstances, sign a petition more than one time, and sign a petition when not qualified to sign it.

Signature	Date Signed mm/dd/yy	Print Name	Residence or Mailing Address street, city, zip code	Precinct # if known
	8/10/26	Joe McNeil	PO Box 405 Fossil OR 97830	
	8/10/26	William J. MacInnes	PO Box 224 Fossil OR 97830	
	8/17/26	Melanie K. Sperry	PO Box 251 Fossil OR 97830	
	8/17/26	Zachary B. Sperry	PO Box 251 Fossil OR 97830	
	8/17/26	Sandra K. Hnert	PO Box 97 Fossil OR 97830	
	8/17/26	Pamela Maye	PO Box 731 Fossil OR 97830	

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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.

Circulator Signature	Date Signed mm/dd/yy	Sheet Number
Carol MacInnes	8-17-26	Completed by Candidate
Printed Name of Circulator	1487 Adams Fossil OR 97830	
Circulator's Address street, city, zip code		