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DEC 07 2010

ARCHIVES DIVISION
SECRETARY OF STATE

State of Oregon OATH OF OFFICE

State of Oregon

County of Multnomah

} ss

Kathleen M Dailey, do solemnly swear (or affirm) that I will support the constitution of the United States, and the constitution of the State of Oregon, and that I will faithfully and impartially discharge the duties of a

Judge of the Circuit Court

of this State, according to the best of my ability, and that I will not accept any other office, except judicial offices, during the term for which I have been elected.

Kathleen M Dailey

Subscribed and sworn, or affirmed, before me
this 3rd day of December, 2010



Rebecca L. Peer
Notary Public for Oregon (or Judicial Title)
My commission/term expires: 2/13/2013

NOTE: KINDLY EXECUTE THIS OATH OF OFFICE BEFORE EITHER A NOTARY PUBLIC OR JUDICIAL OFFICIAL AND RETURN TO OFFICIAL DOCUMENTS, 800 SUMMER ST., SALEM, OREGON 97310.

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ARCHIVES DIVISION

*add to AP 2010-0789

REQUEST TO EXEMPT HOME ADDRESS, PERSONAL ELECTRONIC MAIL ADDRESS, AND PERSONAL TELEPHONE NUMBER FROM DISCLOSURE UNDER THE OREGON PUBLIC RECORDS LAW

Under ORS 192.445 and OAR 137-04-800, I request that the public body or bodies described below not disclose my home address, personal electronic mail address, personal telephone number, or any of them, in the records specified in this request. In making this written request, I submit the following (instructions in italics):

1. I address this request to the following public body or bodies (check those public bodies requested to make records confidential and send copies of this request and attachments to the records custodian of each public body you request to make records confidential):

- The Oregon Judicial Department, Attn: Personnel Division, 1163 State Street, Salem, Oregon 97301-2563.
Driver and Motor Vehicles Services Division, Oregon Dept. of Transportation, 1905 Lana Avenue NE, Salem, Oregon 97314.
[X] The Oregon Secretary of State's Office, 136 State Capitol, Salem, Oregon 97310-0722.
The Oregon Dept. of Administrative Services, Office of the Director, 155 Cottage Street NE, U20, Salem, Oregon 97301-3972.
The trial court administrator for the circuit court of _____ County/Judicial District (insert county or judicial district), (insert address of court) _____
The county clerk for _____ County, (address) _____
Other (type or print): _____

2. As required by OAR 137-04-800, established by the Attorney General under ORS 192.445(2), I submit the following with this written request:

a. The name or description of public record sufficient to identify the record, as follows (check those applicable):

- Any personnel records, payroll records, or other records related to my employment.
[X] Any records related to elections.
Records related to issuing a driver license, driver permit, other driving privileges, or identification card; or to the issuance of any vehicle title or registration or official notice concerning driving privileges, vehicle registration, or vehicle ownership.
Records related to the ownership of any property or to taxation, evaluation, or assessment of any property that can be exempted under OAR 137-04-800.
Other, as described: _____

b. My mailing address as follows (print or type): 19310 Suncrest Dr West Lin OR 97068

c. A nonconfidential telephone number where you can contact me. (NOTE: This information is not required to be provided by statute or rule): 503 988 3062

d. Evidence sufficient to establish that disclosure of my home address, personal electronic mail address, or personal telephone number would constitute a danger to my personal safety or that of a family member residing with me, as follows (check applicable):

- [X] A copy of a court order issued under OAR 137-04-800(2)(K) (attach copy of order).
Other, as described and/or attached: _____

e. [X] (check if applicable) By checking the space at the beginning of this paragraph, I also request as follows: Should you provide any record specified in this request to any other public body, please indicate any exemption granted pursuant to this request so that the records may remain exempt from disclosure under ORS 192.502(10).

3. The following is the information that I request you to withhold: (NOTE: The following information is not required to be provided by statute or rule but can be helpful to a public body seeking to not disclose the information.)

- Home Address(es) (insert addresses sought to be kept confidential, as appropriate):
First address: 19310 Suncrest Dr West Lin OR 97068
Second address: _____
Personal Electronic Mail Address(es) (insert electronic mail addresses sought to be kept confidential, as appropriate):
First address: KathleenM.Dailey@yahoo.com Second address: _____
Personal Telephone Number(s) (insert telephone numbers sought to be kept confidential, as appropriate):
First number: 503 635 3171 Second number: 503 Third number: _____

NOTE: Regardless of the specific address or telephone information provided under this part (part 3), I request that the address and any telephone number I provided in parts "2b" and "2c" of this request be the only information accessible under the Oregon Public Records Law when someone requests records with my home address, personal electronic mail address, or personal telephone number.

4. The following is my signature and name for purposes of this request:

(Signature) Kathleen M Dailey (Name, typed or printed) Kathleen M Dailey (Date) 9/21/15

5. [] (check if applicable) NOTE: I have attached a form for the convenience of the above-described public body in completing the written response requirements to this request under OAR 137-04-800(3) (attach copy of response form).