ALL INFORMATION IS REQUIRED TO BE P	<del> </del>			·				
APPLICATION FOR A PLACE	E ON THE 🦽	144 2017	<u>KZSO</u>	BOMROCF	GENER	RAL ELECTI	ON BALLOT	
TO: City Secretary/Secretary of Board		1		TRUSTER	ES.			
I have been been as a second of the second o		1.70 - 11 11 -	15.1					
I request that my name be placed on the								
OFFICE SOUGHT (Include any place number or other distinguishing num			•		160	INDICATE TERM		
KIBD BUNED OF TRUSTEES, PLACE			e. 4			FULL		
ALOW HORE IT TROOP COST			UNEXPIRED					
FULL NAME (First, Middle, Last)	$\sim$		PRINT NA	ME AS YOU WANT	TT TO AP	PEAR ON TH	E BALLOT <sup>1</sup>	
CHRISTOPHER JOL	2 LOOF	-	17.10	15 KUEN	<u> </u>			
(4/6/8/0/10/6/07							<del>/</del>	
PERMANENT RESIDENCE ADDRESS (Do Route. If you do not have a residence			PUBLIC M	AILING ADDRESS (	Campaign	mailing add	ress, if available.)	
at which you receive personal mail and								
, and the same of							_	
, , , , , , , , , , , , , , , , , , , ,	a. 4 70a		5500	LAURE	SEI	cky 1	DR_	
5500 LAWINSBER	y De	•		<u> </u>				
	ŕ							
CITY	STATE	ZIP	CITY				<del></del>	
	<u></u>	"	}			STATE	ZIP	
FORT WORTH	TK	7613t	FORT	- WORTH		九	76137	
PUBLIC EMAIL ADDRESS (If available)	OCCUP	ATION (Do not lea	eve blank)	DATE OF BIRTH		VOTER RE	GISTRATION VUID	
	- item	CTHCARE		<u> </u>		NUMBER (	(Optional) <sup>2</sup>	
	$\mathcal{L}$	DESTRACT!	NG					
TELEPHONE CONTACT INFORMATION (	Optional)	LENGT	H OF CONTI	NUOUS RESIDENC	E AS OF D	ATE APPLICA	TION SWORN	
			IN STATE			IN TERRITORY FROM WHICH THE		
Work:		:					T IS ELECTED <sup>3</sup>	
AADIK;			39_v	ear (s)		<u> 17</u> year	÷ (c)	
Cell: 972-746-0834	/	ļ	C <sup>l</sup>	' '		-2 YCO	(3)	
		<u>.</u>		onth(s)		/mor	nth(s)	
If using a nickname as part of your name	to appear on	the ballot, you are	e also signin <sub>i</sub>	g and swearing to	the follow	ing statemer	its: I further swear	
that my nickname does not constitute a commonly known by this nickname for a	a siogan nor d it least three v	ides it indicate a j	political, ecc	onomic, social, or	religious v	lew or affilla	ition. Thave been	
						· · · · · · · · · · · · · · · · · · ·		
Before me, the undersigned authority, of	n this day pers	onally appeared (	name)	istopher	- JBa	Roaf	uden landa a tarras	
here and now duly sworn, upon oath say	rs:	, -,-,,			0,000	<u> </u>	wno being by me	
", (name) CHRISTOPHER	ナファ		<del></del>					
candidate for the office of Bank	1 / Car	of _	TAK			County,	. Texas, being a	
of the United States and of the State of This state. They not been finally consider	Tavas Lamac	itizon of the Unite	SWe	ar that I will suppo	ort and de	fend the Cor	stitution and laws	
this state. There not been finally convict	ed of a felony	for which I have o	ot been nar	gible to hold such	Office und	er the consti	tution and laws of	
Attractar actions a make not been defermit	eo by a rinal (t	Jogment of a cour	t exercising	probate jurisdictio	in to be to	stally mantall	restored by other	
partially mentally incapacitated without t	the right to vo	te. I am aware of t	he nepotisn	n law, Chapter 573	, Governn	rent Code.	A ureabacitated of	
I further swell with the CANEDYNNE MON	FYDIDES	in my application	are in all thi	ngs true and corre	ct."	^		
July 24, 20	17	V	101	-1/	1	$\mathcal{O}_{1,2}$		
1800		∠ <b>™</b> _	( 600	ist Oplan	41	Jan. X		
Sworn to and subscribed before me at	Q : Am = A	-20	<del>-</del>	SIGNATURE OF	CANDIDA	\TE		
	Troo Fr	$\mathcal{M}_{\perp}$ , this the $\mathcal{L}$	K. Le day of	gan 2	0/7_			
M. O Da		Yo	. ,	<i>V</i> 7			SEAL	
1 say Lynnello	thence	xo1 / (	otar					
Signature of Officer Administering Oath	<u> </u>	Title of	Officer Admi	iniste ing Oath				
TO BE COMPLETED BY CITY SECRETARY OF	R SECRETARY (	OF BOARD:						
(See Section 1.007)	D-4- D	-1				····	·	
Voter Registration Status Verified	Date Rec	eived	Si	ignature of Secreta	ary			

## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

s	see CTA Instruction Guide for detailed instructions.	1 Total pages filed;				
2 CANDIDATE NAME	MS/MRS/MR FIRST MI  A(R. CHRISTOPHER J  NICKNAME LAST SUFFIX  ROOF	OFFICE USE ONLY  Acct. #  Date Received				
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE, ZIP CODE  5500 LAWRIE BERRY DR  FT. WORTH, TX 76/36	7				
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION  (97) 746-08/34	Date Hand-delivered or Posimarked  Date Processed				
5 OFFICE HELD (if any)	Nowe	Date Imaged				
6 OFFICE SOUGHT (if known)	KELLER ISD BOAKS OF TRUSTEES	, Pixce 4				
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME	LAST SUFFIX				
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE#; CITY, STATE;  5500 (ARXX) BERRY Dr. FORT WORTH, "	ZIP CODE TK 76137				
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (772) 746 - 0834					
O CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.					
	I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of				
	I am aware of the restrictions in title 15 of the Election Confirm corporations and labor organizations.	ode on contributions				
	Cle eistopleas (Co) 1/ Signature of Candidate	26/20/7 Date Signed				
<u></u>	GO TO PAGE 2					