All information is required to be provided unless indicated as optional.								
APPLICATION FOR A PLACE ON THE KISP School BOAR d. May GENERAL ELECTION BALLOT								
TO: City Secretary/Secretary of Board								
the state of the state of the state of the state of the office indicated helps								
I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.  OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)								
FULL NAME (First, Middle, Last)	. /						·	
FULL NAME (First, Middle, Last)			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT					
Jones HARROLL Stitt Jim Stitt								
BERMANENT PESIDENCE ADDRESS (Do not	PUBLIC MA	PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)						
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe the address								
at which you receive personal mail and loca				_				
77007	77		<b></b>	Same				
CITY STATE ZIP			CITY STATE ZIP					
		•				JIAIL		
FE. Worth	14 7	6137						
PUBLIC EMAIL ADDRESS (If available)	OCCUPATIO	N (Do not lea	ave blank)	DATE OF BIRTH			STRATION VUID	
1	RETIRED					NUMBER (Op	· •	
I'M Stritte Kenser	750.NB	7		07101		1051981		
TELEPHONE CONTACT INFORMATION (Opt.	ional)	LENGT		NUOUS RESIDENC				
Home:		IN STATE			IN TERRITORY ELECTED FROM			
Work:			<u> </u>	20 year (s)		26 year (s)		
, '			month(s)		month(s)			
Celi: 817-22:3-7:20 — month(s) — month(s)  If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear								
that my nickname does not constitute a slogan nor does it indicate a political, economic, social, or religious view or affiliation. I have been								
commonly known by this nickname for at least three years prior to this election.								
are much the desired to the second of the se								
Before me, the undersigned authority, on this day personally appeared (name) Tant 5 Horal Light who being by me here and now duly sworn, upon oath says:								
and the state of t								
"I, (name) NAMES W. JH, H of THRRIPNE County, Texas, being a								
candidate for the office of 73 v 5 Tee D A C K 15 D, swear that I will support and defend the Constitution and laws								
of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other								
official action. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or								
partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code.								
I further swear that the foregoing statements included in my application are in all things true and correct."								
V O O O								
James H. Yluts								
Sworn to and subscribed before me at 10:35 Am , this the 30 day of 30 , 2014.								
Sworn to and subscribed before me at 10:35 HTM this the 180 day of 100 John 100 G								
GAYE LYNNE MONTEMAYOR								
Man Lynn Montebrason Totary July 24, 2017								
Signature of Officer Administering Oath Title of Officer Administering Oath								
TO BE COMPLETED BY CITY SECRETARY OR S	ECRETARY OF B	OARD:					İ	
(See Section 1.007)	Date Receive	-d	- <del>-</del>	ignature of Secret	arv	··········	<del></del>	
_		•		C 0, 000, C	1			
Voter Registration Status Verified								

## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

Se	ee CTA Instruction Guide for detailed instructions.	1 Total pages filed:					
2 CANDIDATE	MS/MRS (MR) FIRST TAMES MI H.	OFFICE USE ONLY					
NAME	Stitt	Acct. #					
	NICKNAME LAST SUFFIX						
		Date Received					
3 CANDIDATE	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE, ZIP CODE	-					
MAILING	Contract of the second of the						
ADDRESS	1						
	3729 TUNIP Thee Dr.						
4 CANDIDATE	AREA CODE PHONE NUMBER EXTENSION	Date Hand-delivered or Postmarked					
PHONE							
	(817) 223-4209	Date Processed					
5 OFFICE		Date Imaged					
HELD (if any)	TRUSTER PARCE 1 KiSD						
6 OFFICE							
SOUGHT (if known)	TRUSTER PLACE 1 KISD						
7 CAMPAIGN	MS/MRS/MR FIRST MI NICKNAME	LAST SUFFIX					
TREASURER NAME							
	SELF						
8 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE					
TREASURER		D. 0002					
STREET ADDRESS	Some as above						
(residence or business)	Spore AS ADOVE						
O CASADA IONI	AREA CODE PHONE NUMBER EXTENSION						
9 CAMPAIGN TREASURER	EATERISIA						
PHONE	(817) 223 1209						
	0	· · · · · · · · · · · · · · · · · · ·					
10 CANDIDATE SIGNATURE	Large success of the Noneticm Law Chapter 572 of the To-	2					
	I am aware of the Nepotism Law, Chapter 573 of the Tex	cas Government Code.					
	I am aware of my responsibility to file timely reports as	required by title 15 of					
	the Election Code.	roquirou by and					
	am aware of the restrictions in title 15 of the Election Co	ode on contributions					
	from corporations and labor organizations.						
	1 MALI	/					
	- Show the Date	1019-16					
	Signature of Candidate	Date Signed					
	GO TO PAGE 2						

## CANDIDATE MODIFIED REPORTING DECLARATION

P.O. Box 12070

FORM CTA PG 2

- 11 CANDIDATE NAME
- 12 MODIFIED REPORTING DECLARATION

## COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING

- •• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••
- •• The modified reporting option is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.)
  - •• Candidates for the office of state chair of a political party may NOT choose modified reporting. ••

I do not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.

Year of election(s) or election cycle to which declaration applies

Signature of Candidate

This appointment is effective on the date it is filed with the appropriate filing authority.