

APPLICATION FOR A PLACE ON THE Keller I.S.D. GENERAL ELECTION BALLOT

TO: Secretary of Board

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. <u>Place 7</u>	INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED
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FULL NAME (First, Middle, Last) <u>David Wayne Staine</u>	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT <u>David W. Staine</u>
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PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) <u>6912 Amber Dale</u>	MAILING ADDRESS (If different from residence address)
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CITY <u>Fort Worth</u>	STATE <u>Texas</u>	ZIP <u>76137</u>	CITY	STATE	ZIP
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EMAIL ADDRESS (OPTIONAL) <u>[REDACTED]</u>	OCCUPATION (Do not leave blank) <u>Manufacturing Supervisor</u>	DATE OF BIRTH <u>02/14/73</u>	COUNTY OF RESIDENCE <u>Tarrant</u>
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TELEPHONE NUMBER (Include area code) (Optional) OFFICE: <u>(817) 745-1300</u> HOME: <u>(682) 552-3625</u>	Length of Continuous Residence as of Date Application Sworn		
	IN STATE <u>41</u> yr(s) mos	IN CITY <u>8</u> yr(s) mos	IN DISTRICT OR PRECINCT <u>8</u> yr(s) mos

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.

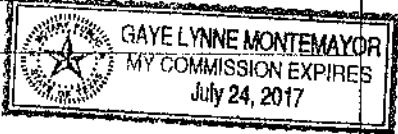
Before me, the undersigned authority, on this day personally appeared (name) David Staine, who being by me here and now duly sworn, upon oath says: "I, (name) David Staine of Tarrant County, Texas, being a candidate for the office of Place 7, swear that I will support and defend the Constitution and 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."

X \_\_\_\_\_  
SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at 4:57 pm this the 27 day of February 2015.

Gay Lynne Montemayor Notary  
Signature of Officer administering oath Title of Officer administering oath



TO BE COMPLETED BY SECRETARY OF BOARD:  
(See Section 1.007)

Date Received Signature of Secretary

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed.

2 CANDIDATE  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. David W. Staine

OFFICE USE ONLY

Accl. #

Date Received

3 CANDIDATE  
MAILING  
ADDRESS

ADDRESS / PO BOX,

APT / SUITE #,

CITY,

STATE,

ZIP CODE

6912 Amberdale Dr Fort Worth TX 76137

4 CANDIDATE  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(682) 552-3625

Date Hand-delivered or Postmarked

Date Processed

5 OFFICE  
HELD  
(if any)

Date Imaged

6 OFFICE  
SOUGHT  
(if known)

Place 7

7 CAMPAIGN  
TREASURER  
NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. David W. Staine

8 CAMPAIGN  
TREASURER  
STREET  
ADDRESS  
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE),

APT / SUITE #,

CITY,

STATE,

ZIP CODE

6912 Amberdale Dr Fort Worth TX 76137

9 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(682) 552-3625

10 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 required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Signature of Candidate

Date Signed

 7-27-15

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# CANDIDATE MODIFIED REPORTING DECLARATION

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.

*2015*

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.