APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION

LINFORMATION IS REQUIRED TO BE PROVIDE APPLICATION FOR A PLACE O	N THE	MID	V Pra	ATT VIII	-LAGB	ed informatio	on may result in	rejection of appli	
TO: City Secretary/Secretary of Board		Han		election)	ongs	GENE	RAL ELECT	ION BALLOT	
I request that my name be placed on the	above-name	ed offici	al hallot a	election)	to for the effi-	- ! d! 1 !			
OFFICE SOUGHT (Include any place numb	ber or other	distingu	iching nur	phor if any	e for the offic		pelow.		
ALDERMAN 2	oci oi otilei	uistiligu	norming mur	ilber, ir any	.) INDICATI	: TERM			
			15		FULL		UNEXPIR	RED	
FULL NAME (First, Middle, Last)				PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*			BALLOT*		
JUST HUAD BENDE	2				JOER A	Lan	X		
PERMANENT RESIDENCE ADDRESS (Do not i		Pay or Due	ed Davida 16						
you do not have a residence address, describe lo	cation of resid	ence.)	al Route. If	PUBLIC M	elated correspor	SS (Optional	(Address for w	hich you receive	
VIIGE TO MEMORIAL DA	13	,		campaign	elated correspor	idence, ir avail	able.)		
CITY	STATE	ZIP	-	CITY			CTATE	710	
FILLSON	TX	170	mil				STATE	ZIP	
			- 1						
PUBLIC EMAIL ADDRESS (Optional) (Address	for OCCUP	PATION (Do not lea	ve blank)	DATE OF BIR	TH	VOTER REG	ISTRATION VUID	
Mass Caches Macad. Con	ich you receive campaign related emails, if available.)				DI 10	05,20,59		NUMBER ² (Optional)	
TELEPHONE CONTACT INFORMATION (Opt		NUC	DALLA		00,00	159			
		-	17 70	1- 6-		-	4 0-1	2 4.4	
Home:	Of	fice: /		16-57!		Cell:	13-206	SAD	
FELONY CONVICTION STATUS (You MUST o	neck one)		LENGTH	OF CONTIN	UOUS RESIDENC			TION WAS SWORN	
I have not been finally convicted of a for	34	-1, 72	INT	THE STATE C	F TEXAS	IN TERRIT	ORY/DISTRICT,	PRECINCT FROM	
I have been finally convicted of a felon	y, but I have	been	wear(s)			WHICH THE OFFICE SOUGHT IS ELECT			
pardoned or otherwise released from the resulting			year(s)		/ear(s)	year(s)		year(s)	
disabilities of that felony conviction an	d I have prov	ided		9	month(s)	A			
proof of this fact with the submission of a proof of this fact with the submission of a proof of the proof of	triis applica	ition.			THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW		-	month(s)	
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APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

	e CTA Instruction Guide for detailed instructions.	1 Total pages fi	iled:
2 CANDIDATE NAME	MS / MRS MR FIRST MI A SUFFIX	OFFIC Filer ID #	E USE ONLY
	BENDER	Date Received	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE NOTE: NOTE: ZIP CODE NOTE: ZIP CODE NOTE: ZIP CODE		
4 CANDIDATE	AREA CODE	Date Hand-delivered	d or Postmarked
PHONE	(712) 206-2840	Receipt#	Amount \$
5 OFFICE HELD (if any)	ANDGOMAN 3	Date Imaged	
6 OFFICE SOUGHT (if known)	ALDEENAN 3		
7 CAMPAIGN TREASURER NAME	MS/MRS (B) FIRST MI NICKNAME FOR A BENOTE	LAST	SUFFIX
3 CAMPAIGN	STREET ADDRESS; APT / SUITE #; CITY;	STATE;	ZIP CODE
TREASURER STREET ADDRESS (residence or business)	NG69 MEMORIAL DAVE HOWSTON, OX 77024		
TREASURER STREET ADDRESS	221		
TREASURER STREET ADDRESS (residence or business) CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION (713) 206-36440 I am aware of the Nepotism Law, Chapter 573 of the Te		
TREASURER STREET ADDRESS (residence or business) CAMPAIGN TREASURER PHONE CANDIDATE	AREA CODE PHONE NUMBER EXTENSION (713) 206-3440		
TREASURER STREET ADDRESS (residence or business) CAMPAIGN TREASURER PHONE CANDIDATE	AREA CODE PHONE NUMBER EXTENSION (113) 206-2040 I am aware of the Nepotism Law, Chapter 573 of the Tell am aware of my responsibility to file timely reports as	s required by	title 15 of
TREASURER STREET ADDRESS (residence or business) CAMPAIGN TREASURER PHONE CANDIDATE	AREA CODE PHONE NUMBER EXTENSION (113) 206-3040 I am aware of the Nepotism Law, Chapter 573 of the Tell I am aware of my responsibility to file timely reports as the Election Code. I am aware of the restrictions in title 15 of the Election Code.	s required by	title 15 of

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

- 11 CANDIDATE NAME JOOR 1. HANDER
- 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 \$1,010 in political contributions or make more than \$1,010 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.

2014

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.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us

or mail to Texas Ethics Commission P.O. Box 12070 Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority DO NOT SEND TO TEC

For more information about where to file go to: https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php