

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE SANDY OAKS SPECIAL ELECTION BALLOT

TO: City Secretary/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.)

Alderman Place #1

FULL NAME (First, Middle, Last)

Brandon Paul Smith

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT¹

Brandon Paul Smith

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 location of residence.)

23030 Hickory Shadow
Sandy Oaks, TX 78112

PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)

23030 Hickory Shadow

CITY

Sandy Oaks

STATE

TX 78112

ZIP

CITY

Sandy Oaks

STATE

TX 78112

ZIP

PUBLIC EMAIL ADDRESS (If available)

Brandon.P.Smith84@gmail.com

OCCUPATION (Do not leave blank)

Oil Field Supervisor

DATE OF BIRTH

09/05/84

VOTER REGISTRATION VOID NUMBER (Optional)²

TELEPHONE CONTACT INFORMATION (Optional)

Home: N/A

Work: N/A

Cell: 210-952-1792

LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN

IN STATE

23 year(s)

8 month(s)

IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED³

23 year(s)

8 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.

Before me, the undersigned authority, on this day personally appeared (name) Brandon Smith, who being by me here and now duly sworn, upon oath says:

"I, (name) Brandon Smith, of Betar Co. County, Texas, being a candidate for the office of _____, 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 mm wh

Sworn to and subscribed before me at _____, this the 2 day of March 2017

SIGNATURE OF CANDIDATE

LAURA SOSA

Notary Public, State of Texas
Comm. Expires 04-11-2020
Notary ID 130614432

Signature of Officer Administering Oath⁴

Title of Officer Administering Oath

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

Date Received

Signature of Secretary

Voter Registration Status Verified ☒

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE November 2017 GENERAL ELECTION BALLOT

TO: City Secretary/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.)

INDICATE TERM

☒ FULL

☐ UNEXPIRED

FULL NAME (First, Middle, Last)

Brandon Paul Smith

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT¹

Brandon Smith

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 location of residence.)

23030
Hickory Shadow

PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)

23030
Hickory Shadow

CITY

Elmendorf

STATE

TX

ZIP

78112

CITY

Elmendorf

STATE

TX

ZIP

78112

PUBLIC EMAIL ADDRESS (If available)

BrandonSmith04@gmail.com

OCCUPATION (Do not leave blank)

Seaman

DATE OF BIRTH

9/5/84

VOTER REGISTRATION VOID NUMBER (Optional)²

1167197166

TELEPHONE CONTACT INFORMATION (Optional)

Home:

Work:

Cell: 2109521792

LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN

IN STATE

20 year(s)

month(s)

IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED³

13 year(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.

Before me, the undersigned authority, on this day personally appeared (name) Brandon Smith, who being by me here and now duly sworn, upon oath says:

"I, (name) Brandon Smith, of Bexar County, Texas, being a candidate for the office of Alderman Place 1, 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

MM CH

SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at 6:50 pm, this the 17th day of Aug, 2017.

Charlotte Rabe

Signature of Officer Administering Oath⁴

City Clerk

Title of Officer Administering Oath

SEAL

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

Date Received

8/17/17

Signature of Secretary

Charlotte Rabe

Voter Registration Status Verified ☒