ALL INFORMATION IS REQUIRED TO BE PRO	OVIDED UNL	ESS INDICATED OPT	IONAL	0			1/201/
APPLICATION FOR A PLACE (TO: City Secretary/Secretary of Board	ON THE _	5 May 2018 <u>/</u>	111999	GENERAL E	LECTIO	N BALLOT	
I request that my name be placed on the	ahove-name	ed official hallot as	a candidate	e for the office indic	atad bala		
OFFICE SOUGHT (Include any place numb	er or other	distinguishing num	ber, if any.)		CATE TERM	
Mayor, Salado, Te	exas					FULL UNEXPIRED	
FULL NAME (First, Middle, Last)			PRINT NA	ME AS YOU WANT			BALLOT ¹
E.F. Skip Blancett			Skip Blancett				
PERMANENT RESIDENCE ADDRESS (Do n			PUBLIC N	AILING ADDRESS (Campaign	mailing addr	ess, if available.)
Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.) 2513 Hester Way			2513 Hester Way				
			5	Salado, Texas 76571			
Salado, Texas							
76571							
CITY	STATE	ZIP	CITY			STATE	ZIP
Salado	_ TX	76571	Sala	ado		тх	76571
UBLIC EMAIL ADDRESS (If available)	OCCIII	DATION (De net les	um blanki	DATE OF BIRTH		2	The state of the s
BlancettSkip@yahoo.com		OCCUPATION (Do not lea				VOTER REGISTRATION VUID NUMBER (Optional) 2	
	Cnie	f,Counseling	нооа	11 /09	/1946		
ELEPHONE CONTACT INFORMATION (O	ptional)	LENGT	H OF CONT	INUOUS RESIDENCE	AS OF D	ATE APPLICA	TION SWORN
Home: 254.947.9083			IN STATE IN T		IN TE	ERRITORY FROM WHICH THE	
Work: 254, 287,7353				OF	FFICE SOUGHT IS ELECTED ³		
234. 287./353		1	19 year (s)				
Cell: 254. 493-6657			7 month(s)			7 month(s)	
fusing a nickname as part of your name hat my nickname does not constitute a ommonly known by this nickname for at	slogan nor	does it indicate a	e also signi political, ed	ng and swearing to	the follow religious	ing stateme	nts: I further swear
defore me, the undersigned authority, on tere and now duly sworn, upon oath says	this day pe	rsonally appeared	(name) <u>E</u>	F. Skip 1	BLAN	VEET	who being by me
I, (name)E. F. Skip Blance	ett	_£		-//	Bell		O
andidate for the office ofMayor		of	SWARE	that I will support a			, Texas, being a
the United States and of the State of T this state. I have not been finally conv ther official action. I have not been o capacitated or partially mentally incapa	ricted of a fe determined	elony for which I have by a final judgme	ted States ave not bee ent of a co	eligible to hold suci en pardoned or had ourt exercising prol	n office u my full r bate juris	nder the con ights of citize diction to b	enship restored by e totally mentally
further swear that the foregoing stateme	ents include	d in my application	are in all t	hings true and con	ect."	10	
		A	E.F. Ski	p Blancett . 4	ECANDID	ATE	ancet
worn to and subscribed before me at $ extcolor{d}{ extco$:50 P.	this the	6 th day	_200		Matter Co.	CARA MCPARTLAND
Caya Glopas Hay Dignature of Officer Administering Oath			ary Pu	blic ministering Oath	Or Salar	Cor	ar\$\$\deltaof Ic. State of
O BE COMPLETED BY CITY SECRETARY O		Y OF BOARD:		A sale	4	. 1	2
See Section 1.007)	6	ruary 16,20	18	Charle	ero	etlas	SL
oter Registration Status Verified	Date R	eceived 4:50 p	.AL.	Signature of Secret	tary	-	
ore: veRiprioriou prarra AGUU60 🕝							

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

Sec	CTA Instruction Guide for detailed Instruction	ns.	1 Total pages filed:
2 CANDIDATE NAME E.F. Skip Blancett	MS/MRS/MR FIRST Mr. E.F. Skip Blancett NICKNAME LAST	Skip	OFFICE USE ONLY Filer D #
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX, APT / SUITE #; CITY: 2513 Hester Way Salado	STATE: ZIP CODE Texas 76571	February 110, 2018 Of 4:50 p.m. Care He Partland City Secretary Date Hand-delivered or Postmarked
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER 254 493-8657	EXTENSION	Receipt# Amounts Date Processed
5 OFFICE HELD (if any)	Mayor		Palosuary 16,2018 Fabruary 16,2018
6 OFFICE SOUGHT (if known)	Mayor		(10) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI Mrs. Cathy	NICKNAME	LAST SUFFIX Sands
8 CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 2300 Indian Trail	CITY; STATE; Salado TX	ZIP CODE 76571
(residence or business)	The state of the s		
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER 254 913-5468	EXTENSION	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Ch I am aware of my responsibility to fi the Election Code. I am aware of the restrictions in title from corporations and labor organizations. Signature of Candidate	ile timely reports a 15 of the Election ations.	s required by title 15 of
	GO TO PAGE	2	

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME	E.F. Skip Blancett
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. ••
ψ.	•• 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. ••
12	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.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us or Fax this form to (512) 463-8808 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/whatsnew/NewFilersGettingStarted.html