ALL INFORMATION IS REQUIRED TO BE PR								
APPLICATION FOR A PLACE ON THE November 3, 2021 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.)								
Dickiason City Council At Large Position 1								
PRINT MARIE AS 100 WART IT TO AFFEAR ON THE BALLOT								
Johnnie Simpson dr			Johnnie Simpson Jr					
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rur			(					
Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.)								
5006 Westwood Dr. P.O. Box 747								
3000 VVESTU	1000	. ISA.	١.,	0. 1301C 2	-1 /			
CITY	CTATE	710	CITY		STATE	ZIP		
CITY	STATE	ZIP	CITY					
Dickinson	TX			kinson	T			
PUBLIC EMAIL ADDRESS (If available)  Vote Johnnie 5 impsone g	Mail	ATION (Do not lea	ave blank)	- Servennise	NUM	R REGISTRATION VUID BER (Optional) <sup>2</sup>		
1916701111102111410000	m Pa	stor		A		11329297		
TELEPHONE CONTACT INFORMATION (C	ptional)	LENGT	H OF CONT	NUOUS RESIDENCE AS		Y FROM WHICH THE		
notile.			INSTATE			OFFICE SOUGHT IS ELECTED <sup>3</sup>		
Work:			23 year (s)			4 year (s)		
Cell:			O month(s)			6 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.								
				1 1	• 1	16		
Before me, the undersigned authority, on this day personally appeared (name) Johnnie Sinpson Jr, who being by me here and now duly sworn, upon oath says:								
"I, (name) John Le Simpson Jr of Galveston County, Texas, being a candidate for the office of Oleknson City County Arberta, swear that I will support and defend the Constitution and laws								
"I, (name) Johan 12 Si	mpson	of Council	Gal	vestor	Co	ounty, Texas, being a		
of the United States and of the State of	Texas. I am a c	itizen of the Unit	ted States e	ligible to hold such off	ice under the o	constitution and laws of		
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."								
1 Imie San Camming								
SIGNATURE OF CANDIDATE								
Sworn to and subscribed before me at 2:41 p.m., this the day of August, 2021								
Karalana City Constant								
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
Signature of Officer Administering Oath Title of Officer Administering Oath  TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:								
(See Section 1.007)								
Voter Registration Status Verified  Date Received Signature of Secretary  Voter Registration Status Verified								
voter registration status verified				<u> </u>				

## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

See	e CTA Instruction Guide for detailed instructions.	1 Total pages filed:
2 CANDIDATE * NAME	MS/MRS/MR FIRST MI Johnnie	OFFICE USE ONLY Filer ID #
	Simpson Jr	Date Received
3 CANDIDATE MAILING ADDRESS	P.O. Box 747 Dickinson TX 7	·
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION  (281) 712 - 5618	Receipt # Amount \$  Date Processed
5 OFFICE HELD (if any)		Date Imaged
6 OFFICE SOUGHT (if known)	City Council At Large Position	ion 1
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME  Mrs. Latoya	Simpson
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT/SUITE # CITY,  5006 Westwood Pr. Dic	state zipcode  Kinson TX 77539
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (281) 704 - 9088	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of t I am aware of my responsibility to file timely repo the Election Code.	
	I am aware of the restrictions in title 15 of the Electrom corporations and labor organizations.	tion Code on contributions
	Signature of Candidate  GO TO PAGE 2	Date Signed
	GO TO PAGE 2	



## Candidate Authorization Form to Release E-Mail Address:

Candidate for the November 2, 2021 City of Dickinson Special Election

Candidate Name: Johnnie Simpson Jr

- ► On the "Application for a Place on the City of Dickinson Election Ballot" form, there is a box to list the candidate's e-mail address.
- ▶ Listing the e-mail address is indicated as an optional item to fill out.
- ► The application is subject to open records under the Public Information Act; however, personal e-mails are considered confidential.

By signing this acknowledgement form, the candidate is indicating their approval to release their e-mail address should they include it on the application form.

Acknowledged and Approved to Release:

Signature of Candidate

Date: 8/17/2021