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

| FOR A CITY, SCHOOL DISTRICT O | | | | City Secreta |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------|-------------------|
| INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIO | | | May result in re | ^ |
| APPLICATION FOR A PLACE ON THE City of Aman | of election) | GENER | AL ELECTIO | IN BALLUT |
| TO: City Secretary/Secretary of Board (name I request that my name be placed on the above-named official ballot | • | indicated he | low | 5. |
| OFFICE SOUGHT (Include any place number or other distinguishing n | | | iow. | |
| | | [| | _ |
| Amarillo City Council, Place 4 | PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* | | | |
| FULL NAME (First, Middle, Last) | The state of the s | | | ALLOT |
| Sylvia Elaine Stephens | Sylvia Elaine | Steph | ens | |
| PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. | IF PUBLIC MAILING ADDRES | S (Optional) | Address for which | ch you receive |
| you do not have a residence address, describe location of residence.) | campaign related correspond | | | |
| 2201 SW 6th Avenue, # 112 | 605 East 9th | Avenue, | | 1000000 |
| CITY STATE ZIP 79/06-54 | CITY | | STATE | ZIP |
| Amarillo Texas | Amarillo | | Texas | 79105-9998 |
| PUBLIC EMAIL ADDRESS (Optional) (Address for OCCUPATION (Do not I | | ГН | | TRATION VUID |
| which you receive campaign related emails, if available.) | | | NUMBER ² (O | |
| Compassion365@outlook.com World Missions | astor | | | |
| TELEPHONE CONTACT INFORMATION (Optional) | | | | |
| Home: Office: | | Cell: | | |
| TELEVITA CONTINUE (COMMON CITE) | TH OF CONTINUOUS RESIDENCE | | 4-18 | |
| I have not been finally convicted of a felony. | N THE STATE OF TEXAS | WHICH THE OFFICE SOUGHT IS ELECTED | | |
| I have been finally convicted of a felony, but I have been | 47 year(s) | | | |
| pardoned or otherwise released from the resulting | year(s) | | year(s) | |
| disabilities of that felony conviction and I have provided | (O_month(s) | | month(s) | |
| proof of this fact with the submission of this application. ³ *If using a nickname as part of your name to appear on the ballot, you ar | a also signing and swearing to | the following | statements: I | further swear tha |
| my nickname does not constitute a slogan or contain a title, nor does it been commonly known by this nickname for at least three years prior to Election Code regarding the rules for how names may be listed on the of Before me, the undersigned authority, on this day personally appeared (| this election. Please review se ficial ballot. | ections 52.031 | , 52.032 and 52 | 2.033 of the Texa |
| being by me here and now duly sworn, upon oath says: | name of candidate) | viame o | TOFNETT | , wild |
| "I, (name of candidate) Sylvia Elaine Stephens | of Potte | 7 | Count | y, Texas, |
| being a candidate for the office of Amarillo City Council, | | | | 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 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 am aware that I must disclose | | | | |
| any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction | | | | |
| status constitutes a Class B misdemeanor. I further swear that the forego | oing statements included in m | v application a | re in all things | true and correct. |
| | - 0 0 1 0 | 01- 0 |) | |
| X sylva Elsine steplers | | | | |
| | SIGNATURE OF CANDID | | | _ |
| Sworn to and subscribed before me this the 4 day of February (day) | $\frac{\partial \mathcal{U}}{\partial \mathcal{U}} = \frac{\partial \mathcal{U}}{\partial \mathcal{U}}$ by (year) | Stivia (n | ame of candida | |
| Signature of Officer Authorized to Administer Oath ⁴ | Stephan Printed Name of O | fficer Authoriz | ed to Administ | er Oath |
| City Secretary | H / W A AMOUNT OF A | ANIE COG | | |
| Title of Officer Authorized to Administer Oath | Notan | Public, State of HD #1250054 | 9.4 | |
| BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCO | | | Applicable) | PAID BY: |
| CASH CHECK MONEY ORDER CASHIERS CHECK OR | | | many. | NAME AND D |
| This document and \$ 100.00 filling fee or a nominating petition of | pages received. | □ Voter | Registration S | tatus Verified |
| 02,14,2025 02,14,2025 (See Sect | ion 1.007) Stephe | me C | oggy |) |
| Date Received Date Accepted | Signature of Fil | ing Officer or | Designee | |