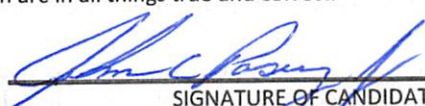


ALL INFORMATION IS **REQUIRED** TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE <u>CITY OF OVERTON, TEXAS</u> 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	
City Council PLACE 2				<input checked="" type="checkbox"/> FULL	
				<input type="checkbox"/> UNEXPIRED	
FULL NAME (First, Middle, Last)			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT ¹		
John Calvin Posey JR			John C Posey		
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.)			PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)		
[REDACTED]			SAME		
CITY	STATE	ZIP	CITY	STATE	ZIP
OVERTON	TX	75684	OVERTON	TX	75684
PUBLIC EMAIL ADDRESS (If available)		OCCUPATION (Do not leave blank)	DATE OF BIRTH	VOTER REGISTRATION VUID NUMBER (Optional) ²	
NA		Supervisor Construction	08/16/1964	1015593320	
LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN					
IN STATE			IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED ³		
55 year (s)			27 year (s)		
_____ month(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) <u>John C. Posey, Jr.</u> , who being by me here and now duly sworn, upon oath says:					
"I, (name) <u>John C. Posey, Jr</u> of <u>Rusk/Smith</u> County, Texas, being a candidate for the office of <u>City Council Place 2</u> , 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					
			SIGNATURE OF CANDIDATE		
Sworn to and subscribed before me at <u>2:06 pm</u> , this the <u>6th</u> day of <u>August</u> , <u>2019</u> .					
<u>Wendy Jean Bates</u>			<u>City Controller</u>		
Signature of Officer Administering Oath ⁴			Title of Officer Administering Oath		
					
TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:					
(See Section 1.007)					
Voter Registration Status Verified <input checked="" type="checkbox"/>			Date Received _____		Signature of Secretary _____

1015593320

INSTRUCTIONS AND FOOTNOTES ON BACK

**TEXAS GOVERNMENT CODE SECTION 552.024
PUBLIC ACCESS OPTION FORM**

[Note: This form should be completed and signed by the employee no later than the 14th day after the date the employee begins employment, the public official is elected or appointed, or a former employee or official ends employment or service.]

John C Posey JR.
(Name)

The Public Information Act allows employees, public officials and former employees and officials to elect whether to keep certain information about them confidential. Unless you choose to keep it confidential, the following information about you may be subject to public release if requested under the Texas Public Information Act. Therefore, please indicate whether you wish to allow public release of the following information.

	PUBLIC ACCESS?	
	NO	YES
Home Address	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Home Telephone Number	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social Security Number	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Emergency Contact Information	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Information that reveals whether you have family members	<input checked="" type="checkbox"/>	<input type="checkbox"/>

[Signature]
(Signature)

7/08/14
(Date)