09/2023

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

ILL HALOKINIA HOM 12 KEGOIKED IO BE LKONIDED	DIVLESS INDICAT	ED AS OF HOM	AL ranure t	o provide requir	ed information	may result in r	ejection of applicati
APPLICATION FOR A PLACE ON THE CITY of Gatesville GENERAL ELECTION BALLOT							
TO: City Secretary/Secretary of Board		(name of	felection)				
I request that my name be placed on the a					indicated be	elow.	
OFFICE SOUGHT (Include any place number	r or other distir	nguishing nun	nber, if any	.) INDICATE	TERM		
Mayor				FULL		UNEXPIRE	D
FULL NAME (First, Middle, Last)			PRINT NA	ME AS YOU W	ANT IT TO APP	EAR ON THE B	ALLOT*
C 100	10/		_	1	1.1		
Gary Maurice Chum	ey	D	Sa	ry Chi	im ley		
PERMANENT RESIDENCE ADDRESS (Do not inc you do not have a residence address, describe loca				MAKING ADDRE			in you receive
,			Cuitt				
CITY	TATE ZI	P	CITY			STATE	ZIP
C	TY -	765 28	Gate			TX	2000
Gatesville				10111			16528
PUBLIC EMAIL ADDRESS (Optional) (Address for	OCCUPATIO	N (Do not lea	ve blank)	DATE OF BIRT	ГН	NUMBER ² (Op	
	Bank	COF				NOWIDER (OF	Monary
TELEPHONE CONTACT INFORMATION (Option							
Home:	Office:				Cell:		
FELONY CONVICTION STATUS (You MUST che		LENGTH	OF CONTIN	UOUS RESIDENC		THIS APPLICATION	ON WAS SWORN
I have not been finally convicted of a feld	ony.	IN 1	THE STATE (OF TEXAS	IN TERRITO	RY/DISTRICT/P	RECINCT FROM
I have been finally convicted of a felony,	but I have been		25		WHICH THE	OFFICE SOUGH	
pardoned or otherwise released from the			35 year(s)			/K year(s)	
disabilities of that felony conviction and			<u></u> month(s)			9 month(s)	
proof of this fact with the submission of			1 Hour Bus Name (All)				
*If using a nickname as part of your name to a my nickname does not constitute a slogan or							
been commonly known by this nickname for a							
Election Code regarding the rules for how nan				rease reriew se	0110113 32.032,	52.052 0.10 52	ioss of the reads
Before me, the undersigned authority, on this	day personally a	anneared (nan	ne of candio	Hatel Garu	Chumir	N.	, who
being by me here and now duly sworn, upon o	ath says:	appeared (man	2		C/. DOI C/C	1	
"I, (name of candidate) Gary Chun			of (Drvell		County	, Texas,
being a candidate for the office of					will support a	The second secon	Constitution and
laws of the United States and of the State of T	exas. I am a citi	zen of the Un	ited States				
this state. I have not been determined by a fi							
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 foregoing statements included in my application are in all things true and correct."							
V /1 0 /							
		Λ.	1	(ru	my		
			IGNATUR	OF CANDIDA	TE /		
Sworn to and subscribed before me this the 2	and day of	July		2024 by		1, Chum	
	day)	(month)		(year)	์ (กล	me of candidate	e)
To lender Colo				10/end	a Col	. مر	
Signature of Officer Authorized to Administer (3a+h4		Deint	ted Name of Off	icar Authoriza	d to Administra	- Ooth
0'1 4	Jatii		rimi	led Name of On	icei Authorize	a to Administer	Oath
City Secretary				Notarial or O	fficial Seal		
Title of Officer Authorized to Administer Oath							
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:							
CASH CHECK MONEY ORDER CASHIERS CHECK OR PETITION IN LIEU OF A FILING FEE							
This document and \$ filing fee or a nominating petition of pages received.							
7 /22/2024 7 /22	12024	See Section :	1 0071	70/000	du/Co	le	
Date Received Date Accepted	- aver	see section :	15	ignature of Filir	g Officer or F)esignee	-

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

See CTA Instruction Guide for detailed instructions.					1 Total pages file	1 Total pages filed:		
2 CANDIDATE '	MS / MR\$ / MR	FIRST		МІ	OFFICE	USE ONLY		
I NAME	ME	Gary		M	Filer ID #			
	NICKNAME	LAST		SUFFIX	Date Received			
		Chamley		with the second second	OSC	SEMMED		
3 CANDIDATE A MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE; ZIP CODE	8-1	1-7074		
			Sutesville	Tx 76528	Date Hand-delivered	or Postmarked		
4 CANDIDATE APHONE	AREA CODE	PHONE NUMBER		EXTENSION	Receipt#	Amount \$		
					Date Processed			
5 OFFICE HELD (if any)	Mayo +				Date Imaged			
6 OFFICE SOUGHT (if known)	Maror							
7 CAMPAIGN TREASURER NAME	IS/MRS/MR	FIRST	М	NICKNAME	LAST	SUFFIX		
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	TREET ADDRESS;	APT.	/SUITE#;	CITY;	STATE:	ZIP CODE		
O CANADAIGNI AF	REA CODE	PHONE NUMBER		EXTENSION				
9 CAMPAIGN AF TREASURER PHONE /	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	THORE HOWBER		EXTENSION				
()							
10 CANDIDATE SIGNATURE	l am aware of	f the Nepotism	Law, Chap	ter 573 of the Te	exas Governm	ent Code.		
I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.								
	I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.							
	1 8 Si	gnature of Candida	ate		2/22/24 Date Signed	<u> </u>		
GO TO PAGE 2								

11 CANDIDATE NAME	Gary Chumby
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. ••
	 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. ••
8	I do not intend to accept more than \$1,010 in political contributions or make more than \$1,010 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 A Chumley 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 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/filinginfo/QuickFileAReport.php

AMENDMENT: APPOINTMENT OF A FORM ACTA CAMPAIGN TREASURER BY A CANDIDATE PG 1 3 Total pages filed: 1 CANDIDATE 2 FILER ID# NAME Gary Chumley See ACTA Instruction Guide for detailed instructions. Use this form for changes to existing information only. Do not provide information previously disclosed. NEW MS/MRS/MR FIRST CANDIDATE OFFICE USE ONLY M-Mr NAME Gary Date Received NICKNAME SUFFIX NEW ADDRESS / PO BOX; APT / SUITE #: STATE: ZIP CODE CANDIDATE MAILING **ADDRESS** Date Hand-delivered or Postmarked Catesville Tx 76538 Receipt # Amount \$ Date Processed AREA CODE PHONE NUMBER EXTENSION NEW **CANDIDATE** PHONE Date Imaged NEW 7 OFFICE HELD (if any) OFFICE SOUGHT (If known) NICKNAME LAST SUFFIX CAMPAIGN TREASURER Gary Chumley APT/SUITE#; CITY; NAME STATE: ZIP CODE 10 CAMPAIGN TREASURER STREET Gatesville, Tx 76528 **ADDRESS** (residence or business) PHONE NUMBER AREA CODE EXTENSION NEW 11 CAMPAIGN TREASURER PHONE 12 CANDIDATE I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. SIGNATURE I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. -11-14 Date Signed gignature of Candidate

GO TO PAGE 2

AMENDMENT:

FORM ACTA

CANDIDATE MODIFIED REPORTING DECLARATION

PG 2

- 13 CANDIDATE NAME
- 14 MODIFIED REPORTING DECLARATION

NEW

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. --
- •• 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. ••

I do not intend to accept more than \$1,080 in political contributions or make more than \$1,080 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.

2624 - 2026 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 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/filinginfo/QuickFileAReport.php

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics C	ommission Filers)	2 Total pages f	iled:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST		MI •(USEONLY
	NICKNAME	Chumley		SUFFIX	Date Received	24
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BC	OX; APT / SUITE #; / C	CITY; STATE;	ZIP CODE		
Change of Address			Gutesville	1X76553		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	ON	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN	MS / MRS / MR	FIRST		МІ	Neceipt #	Amount \$
TREASURER NAME	Mr	Gary	n	1	Date Processed	
	NICKNAME	LAST		SUFFIX		
		Chamb			Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); PT / SU	JITE #; CITY;		STATE;	ZIP CODE
TREASURER						
ADDRESS		^	. 11 1	7	1	,
(Residence or Business)			atesulle TX	1652	3	
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSIO	N		
PHONE						
9 REPORT TYPE	January 15	30th day before ele	ection Runo	ff	15th day afte treasurer ap (Officeholder	pointment
	July 15	8th day before elect	dioii _	eded Modified ting Limit	Final Report	(Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year		Month	Day Year	
OOVERLED	7	22/24	THROUGH	11 /	05 /200	24
11 ELECTION	ELECTION DA		E	LECTION TYPE	0) 00	~ [-
	Month Day	Year Primary	Runoff	Other		
	Month	General	Special	Description		
	11/05/	24	Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SO	UGHT (if known)		
	May	alt	MA	401		
14 NOTICE FROM	THIS BOX IS FOR NOTIC	CE OF POLITICAL CONTRIBUTIONS AC		/ - /	DE BY POLITICAL COME	MITTEES TO SUPPORT
POLITICAL	THE CANDIDATE / OFFICE	CEHOLDER. THESE EXPENDITURES AS S AND OFFICEHOLDERS ARE REQUIRE	MAY HAVE BEEN MADE WI	THOUT THE CANDI	DATE'S OR OFFICEHOLD	ER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
_	GENERAL	COMMITTEE ADDRESS				
Additional Pages	_	COMMITTEE CAMBUON TOTAL	NIDED HAVE			
	SPECIFIC	COMMITTEE CAMPAIGN TREAS	SURER NAME			
	1	COMMITTEE CAMPAIGN TREA	SURER ADDRESS			
		Then				
		GO TO P	AGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

				_
15 C/OH NAME			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	PLEDGES,	ITEMIZED POLITICAL CONTRIBUTIONS (OTHER LOANS, OR GUARANTEES OF LOANS, OR TIONS MADE ELECTRONICALLY)	THAN \$	
		LITICAL CONTRIBUTIONS AN PLEDGES, LOANS, OR GUARANTEES OF LO	ANS) \$ -0-	
EXPENDITURE TOTALS	3. TOTAL UNIT	TEMIZED POLITICAL EXPENDITURE,	\$ 9999	
	4. TOTAL POI	LITICAL EXPENDITURES	\$ 99900	
CONTRIBUTION BALANCE		ITICAL CONTRIBUTIONS MAINTAINED AS OF THI ING PERIOD	E LAST DAY \$ -0 -	
OUTSTANDING LOAN TOTALS		ICIPAL AMOUNT OF ALL OUTSTANDING LOANS A F THE REPORTING PERIOD	AS OF THE \$ ~~ ~~	
		enalty of perjury, that the accompanying report is no under Title 15, Election Code.	s true and correct and includes all informa	tion
100	anca to be reported by in	lie diddi Title 15, Eleddii Gode.		- I
		U 20		
		In the	my	_
		S)gnature o	of Candidate of Officeholder	
		O.	12	- }
	P	Please complete either option be	low:	
	'	lease complete either option be	ю.	
				- 1
(1) Affidavit				
NOTARY STAMP/SEAL				- 1
0				
Sworn to and subscribed before me by this the day of,				
20, to certify v	hich, witness my hand ar	nd seal of office.		
				_,
Signature of officer administer	ng oath	Printed name of officer administering oath	Title of officer administering oat	th
		OR		
(2) Unewern Declaration				-
(2) Unsworn Declaratio				
Maria G	21 Ph. 1.	and my data of hint	h. I.	
My name is	11 Mines	, and my date of birt		-
My address is	/	, Contesulle	1X. 7528 Coryell	.
AMC Coryel	(street)	(city)	(state) (zip code) (country)	
executed in 12/9/2	County, State of	of Toxes, on the 9-14 day of De	onth) (year)	
of 1 to		1	l ~Z	
		Signature of Ca	ndidate/Officeholder (Declarant)	