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

41	LE INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED A	45 OPTIONAL	railure to	proviae required	i information	may result in re	jection of applicati
	APPLICATION FOR A PLACE ON THE City of Gatesville GENERAL ELECTION BALLOT						
	TO: City Secretary/Secretary of Board (name of election)						
	I request that my name be placed on the above-named official	al ballot as a	candidate	for the office	ndicated be	low.	
	OFFICE SOUGHT (Include any place number or other distingu	ishing numbe	er, if any.)	INDICATE 1	ERM		
	Ward & Place 6			1 FULL		UNEXPIRED)
	FULL NAME (First, Middle, Last)	F	PRINT NAM	AE AS YOU WAI	NT IT TO APP	EAR ON THE BA	
	Kalinda Westbrook		2/	11200	1)204	honol	
	1 -4 170000		1411	acqui	vesi,	DIOON	
	PÉRMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rur	al Route. If		IIIIC ABBRECO	16	ddress for which	you receive
	i residence.					s.)	
i	CITY STATE ZIP	7	CITY	Ų	8	STATE	ZIP
	C-1-11/10 70 71	500		2011		7	7/8/20
	Gate3VIIIE 1/X 16	500	Gat	esville		/X	16028
l	PUBLIC EMAIL ADDRESS (Optional) (Address for OCCUPATION (I	o not leave	blank)	DATE OF BIRTH		VOTER REGIST	
	RetiRed	5 Mach	DOD			IUMBER ² (Opt	ional)
Ī	TELEPHONE CONTACT INFORMATION (Optional)	DIFFORM	Jen		950		
1	Home: 254-223-4.393 Office:	SAME			C - III	50 M	P
ŀ	FELONY CONVICTION STATUS (You MUST check one)	-	CONTINE	OLIS RESIDENCE	Cell:	THIS APPLICATION	N WAS SWODN
ł	I have not been finally convicted of a felony.		E STATE OF	-		RY/DISTRICT/PR	
1		114 1116				OFFICE SOUGH	
	I have been finally convicted of a felony, but I have been		63 ye	ear(s)		22 yea	
ı	pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided		10			7	
I	proof of this fact with the submission of this application. ³	-	/ m	onth(s) month(s)			nth(s)
Ī	*If using a nickname as part of your name to appear on the ballot,	you are also	signing and	d swearing to th	e following s	statements: I fu	rther swear that
١	my nickname does not constitute a slogan or contain a title, nor	does it indica	ate a politi	cal, economic,	social, or reli	gious view or at	filiation. I have
l	been commonly known by this nickname for at least three years p			ease review sect	ions 52.031,	52.032 and 52.0	033 of the Texas
ŀ	Election Code regarding the rules for how names may be listed on			1/ 1:	/	/1 1/	
l	Before me, the undersigned authority, on this day personally appears	eared (name	of candida	te) Kalind	la We	STBrook	, who
ĺ	being by me here and now duly sworn, upon oath says:						
	"I, (name of candidate) Kalinda Westbrook	0		ryell		County,	
l	being a candidate for the office of Ward 2 Place						
ı	laws of the United States and of the State of Texas. I am a citizen						
	this state. I have not been determined by a final judgment of a commentally incapacitated without the right to yets. I am guero of the						
	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 K 1 1 1 1 1 1 1 0 0 0 0						
	1 Jaunaa Malor oper.						
L	SÍGNATURE OF CANDIDATE						
١	Sworn to and subscribed before me this the 14th day of Au	gust	21	D24 by K	alinda	Westbro	oK.
	(day) (month) (year) (name of candidate)						
	Tolemby Colo						
	Signature of Officer Authorized to Administer Oath ⁴		Printer	d Name of Offic	or Authorized	d to Administer	Oath
	1.1		rintec	a Ivanie of Onic	el Authorize	u to Auminister	Catil
ı,	Lity Secretary			Notarial or Offi	cial Seal		
ľ	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. Voter Registration Status Verified							
	8 . 14 . 2024 9 . 14 . 2024			7. 1000	14/0	1	
	8 14 2024 8 14 2024 (See	Section 1.0	07)	William	As	lecian	
- 1	UNITE DECENTED DATE ACCEPTED		Sign	DATHER OF FINA	WITHCRE OF D	INCIDIDAD.	

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

\vdash								
	Se	1 Total pages filed:						
2						OFFICE USE ONLY		
	NAME	MR5	Kalii	uda		Filer ID#		
		NICKNAME	LAST	. ,	SUFFIX	Date Received		
			Westl	ROOK		DECENVED		
3	CANDIDATE MAILING ADDRESS		8-14-2024					
						Date Hand-delivered	or Postmarked	
4	CANDIDATE PHONE	APEA CODE	PHONE MINDS		EXTENSION	Receipt#	Amount\$	
						Date Processed		
5	OFFICE HELD (if any)	MIA				Date Imaged		
6	OFFICE SOUGHT (if known)	Wards	2 Plac	e6				
7	CAMPAIGN TREASURER NAME	MS/MRS/MR N/A	FIRST	МІ	NICKNAME	LAST	SUFFIX	
8	CAMPAIGN TREASURER STREET ADDRESS residence or business)	STREET ADDRESS;	-	APT / SUITE #;	спу;	STATE;	ZIP CODE	
9	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION			
10	CANDIDATE SIGNATURE				apter 573 of the Tex			
	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.						outions	
		Kalina	Signature of Ca	brook		3/14/2	4	
_			rigilatule of Ca	nuidate		/Date Signed		
			G	O TO PAGE	2			

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME	Kalinda Westbrook
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. ••
	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 Alinatus Alinatus Alondo. 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

PO Box 12070

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 CAMPAIGN TREASURER BY A CANDIDATE

FORM ACTA PG 1

CAMPAIGN TREASURER BY A CANDIDATE PG 1									
1	CANDIDATE NAME Kalinda Westbrook							3	Fotal pages filed:
	See ACTA Instruction Guide for detailed instructions. Use this form for changes to existing information only. Do not provide information previously disclosed.								
4		NEW	MS / MRS	/ MR	FIRST		MI	OFF	ICE USE ONLY
	NAME							Date Received	
			NICKNAM		LAST		SUFFIX	10-	3-2024
5	CANDIDATE MAILING ADDRESS	NEW	ADDRESS	PO BOX;	APT/SUITE#; C	ITY; STATE;	ZIP CODE	Date Hand-deliv	ered or Pastmarked
								Receipt #	Amount \$
6	CANDIDATE	NEW	AREA CO	DE	PHONE NUMBER	EXTENS	SION	Date Processed	
	PHONE		()				Date Imaged	
7	OFFICE HELD (If any)	NEW							
8	OFFICE SOUGHT (If known)	Ga	tesu	j)le	City Cou	wil, Wa	ard 2	Pho	eb
9	CAMPAIGN TREASURER NAME	NEW	MS / MRS	/ MR	John John	I NICKNAI	ME	LAST	suffix k , ###
10	CAMPAIGN	NEW	STREET A	DDRESS;		APT/SUITE#; CIT		STATE;	ZIP CODE
(TREASURER STREET ADDRESS residence or business)				,	Ga	.tesvill	e, Tx	76528
11	CAMPAIGN TREASURER PHONE	NEW	1051 00	DF.	DUNNE MINDED	EVTENC	ION.		ti.
12	CANDIDATE	lan	n awar	e of the	e Nepotism La	w, Chapter 57	73 of the Te	xas Gover	nment 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.							
	d	A	ale	isla	ture of Candidate	ADR.	_/_	0/3/2 Date Sig	024 Ined
	GO TO PAGE 2								

CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** NAME 11-20-2024 Westbrook 4 CANDIDATE / **OFFICEHOLDER** Gatesville MAILING 76528 ADDRESS Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked OFFICEHOLDER PHONE Receipt # Amount \$ MS / MRS / MR М 6 CAMPAIGN TREASURER Date Processed NAME SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE); STATE: ZIP CODE CAMPAIGN TREASURER Same asabove ADDRESS (Residence or Business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN TREASURER PHONE 9 REPORT TYPE 15th day after campaign 30th day before election January 15 Runoff treasurer appointment (Officeholder Only) Exceeded Modified July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD COVERED THROUGH 11 ELECTION ELECTION DATE **ELECTION TYPE** Runoff Other Month 13 OFFICE SOUGHT (if known) 12 OFFICE OFFICE HELD (if any) City Council THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT 14 NOTICE FROM THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR POLITICAL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Kalinda Westhrook 16 Filer ID (Ethics Commission File							
17 CONTRIBUTION 1. TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ ~ 0-					
2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ - 0 -					
EXPENDITURE 3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 236 ³⁶					
4.	4. TOTAL POLITICAL EXPENDITURES						
CONTRIBUTION 5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ -0-					
OUTSTANDING LOAN TOTALS 6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$ N/A					
	r affirm, under penalty of perjury, that the accompanying report is true be reported by me under Title 15, Election Code.	and correct and includes all information					
Signature of Candidate or Officeholder							
Please complete either option below:							
(1) Affidavit							
NOTARY STAMP/SEAL							
Sworn to and subscribed before me by this the day of,							
20, to certify which, witness my hand and seal of office.							
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath					
NUER DEN LE LA COMPTE DE LA COMP							
(2) Unsworn Declaration							
My name is Kalinda Westhrook , and my date of birth is							
My address i							
(street) (city) (state) (zip code) (country) Executed in COAYE/I County, State of TEXAS, on the Original day of November, 20 27. Signature of Candidate/Officeholder (Declarant)							