BOARD CANDIDATE BIOS

We would like to include some information about each Board Candidate on the District website after the final certification date (Jan. 28).

Please email a headshot and a short bio (max of 200 words) to jennifer.jolls@fhsdschools.org by Friday, Jan. 31, 2025.

Please note the following:

- Candidates will be listed on the District website and social media channels in the same order they will appear on the ballot.
- Bios will be published unedited and exactly as they are submitted, so please take care to proofread and ensure you've included the most important information in your bio.
- If you do not submit a photo and 200-word bio by January 31, 2025, only your name will be listed.

Francis Howell School District BOARD ELECTIONS (Candidate Declaration)

To: Board Secretary of the Francis Howell School District or Designee

I, the undersigned, a resident of the Francis Howell School District, declare myself a candidate for the office of a director of said school district for a term of three (3) years, to be voted on at the municipal election to be held on the 8th day of April, 2025.

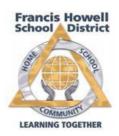
I declare that I am eligible to hold office in accordance with Missouri law. I:

- 1. Am a citizen of the United States of America, Mo. Const. art. VII, '8; '162.291, RSMo.
- 2. Am a resident taxpayer of the Francis Howell School District 162.291, RSMo.
- 3. Will have resided in Missouri and in the District for a minimum of one year immediately preceding my election, if elected. Mo. Const. art. VII, '8; '162.291, RSMo.
- 4. Am at least 24 years of age. ' 162.291, RSMo.
- 5. Am not delinquent in the payment of any state income taxes, personal property taxes, municipal taxes or real property taxes on my place of residence listed below. If I am a past or present corporate officer of any fee office, I verify that office does not owe any taxes to the state. I understand that I am required by law to file an affidavit stating these facts with the Missouri Department of Revenue. ' 115.306, RSMo.
- 6. Have not been found guilty of nor have I pled guilty to a felony under the federal laws of the United States of America or to a felony under Missouri law or an offense committed in another state that would be considered a felony in Missouri. ' 115.306, RSMo.
- 7. Am not registered or required to be registered as a sex offender pursuant to Missouri law. ' 162.014, RSMo.
- 8. Have filed, or the treasurer of any existing candidate committee has filed, all required campaign disclosure reports with the Missouri Ethics Commission, when applicable, for all previous elections in which I was a candidate. ' 130.071, RSMo.

Note: All information provided to the district will be a public record and could be requested by members of the public under the Sunshine Law.

	Print Full Legal Name for Ballot				
	Address				
	City				
	Phone				
	E-mail Address				
I swear that the above language is true and accurate, that I am legally eligible to be a candidate for the office of director of this school district, and that I am legally able to hold office if elected or otherwise appointed to the position.					
Candidate's Signature					
Subscribed and sworn to before me on	[date] at [time].				
Signature of Board Secretary, Authorized Designee or Notary					
I understand that if I am elected or appointed to the Board, I am required by law to successfully complete 18.5 hours of Board training within one year of the date I am elected or appointed. ' 162.203, RSMo.					
Use if Ballot Place	ment Is by Random Drawing				
Number Drawn: Candidate's Initials to Verify Number Drawn	<mark>n</mark> :				

* * * * * * *



FILING FOR CANDIDACY FOR BOARD OF EDUCATION DIRECTOR ELECTION DATE: APRIL 8, 2025

TO DECLARE CANDIDACY COMPLETE AS LISTED BELOW

- 1. DECLARATION OF CANDIDACY
 - a. 3-year term to expire April 2028 (April 2025-April 2028) *signature needed
- 2. ACKNOWLEDGEMENT CANDIDATE RECEIVED REQUIRED INFORMATION *signature needed
- 3. MO DEPT OF REVENUE FORM 5120 <mark>CANDIDATE MUST MAIL THIS FORM IN</mark>
 - a. Candidate's Affidavit of Tax Payments and Bonding Requirements (MO Dept. of Revenue Form 5120). This is an affidavit sent to the Department of Revenue verifying candidate does not owe taxes as defined in the affidavit.
- 4. NOTICE OF CANDIDATES' OBLIGATION TO FILE A FINANCIAL INTEREST STATEMENT *CANDIDATE MUST FILE ONLINE OR VIA FORM ON OR BEFORE JANUARY 14, 2025
 - a. Financial Disclosure Statement for Political Subdivisions This form can be filed on-line and instructions included in folder.
- 5. BOARD CANDIDATE BIO *Candidate must submit BIO
 - a. Submit to jennifer.jolls@fhsdschools.org by 1/31/25

WEBSITES FOR CANDIDATE INFORMATION

MISSOURI SCHOOL BOARDS' ASSOCIATION https://www.mosba.org/page/board-candidates

DEPARTMENT OF REVENUE http://dor.mo.gov/personal/candidates/

ST. CHARLES COUNTY BOARD OF ELECTION https://www.sccmo.org/410/Election-Authority

MISSOURI ETHICS COMMISSION http://www.mec.mo.gov/

FRANCIS HOWELL SCHOOL DISTRICT www.fhsdschools.org

MARK YOUR CALENDAR						
12/10/24	8am Filing Opens - FILING OCCURS UNTIL 5PM FIRST AND LAST DAY, 4:30pm ALL OTHER DAYS No filings will be accepted on dates when the office is closed (12/23/24 - 12/30/24) or when closed for inclement weather.					
Candidate filing closes - (OFFICE WILL BE OPEN from 4:00–5:00pm. Candidate Information Sheet due to the Board Secretary and completed by 5pm deadline						
1/14/25 Last date to file Financial Disclosure Statement with Missouri Ethics Commission without \$10 filing fee						
1/21/25 Last day to file by 21-day deadline before removal from ballot						
Last date to provide a copy of the notarized affidavit to Francis Howell School Board of Education Secretary for f Declaration of Candidacy for withdrawal of name from the election without a Court Order						
1/28/25 Certification Date – Candidate withdrawals after this date must be done by Court Order						
4/08/25	Election Day for Board of Education Directors					
4/15/25	Board of Education Meeting – ReOrganization Meeting and swearing in of elected board members					
	Any questions: Please contact Jane Hepler, Board Secretary, at 636-851-4026 or jane.hepler@fhsdschools.org					

Notice to Candidate

Regarding Personal Financial Disclosure (PFD)/Financial Interest Statement Filing Requirement						
Part One: Candidate Information						
Candidate's Name:		Political Subdivision:	Francis Howell School District			
Office Sought: School Board		Election Date:	April 8, 2025			
Part Two: Fil	ing Status (check one)				
Candidate must file a PFD/Financial Interest Statement with the Missouri Ethics Commission (proceed to part 3) A candidate must file a PFD/Financial Interest Statement if (only one must apply): The political subdivision has an annual operating budget over \$1 million and the subdivision does not have a conflict of interest ordinance on file with the MEC and the candidate is required to file pursuant to \$\frac{8}{2}\$ 105.483—105.492, RSMo.; or The political subdivision has an annual operating budget over \$1 million and has a conflict of interest ordinance on file with the MEC that specifically requires a candidate running for this position to file; or the candidate (or their spouse, child(ren), parents, or a business in which they own a substantial interest) has had a business transaction with the political subdivision in excess of \$500 in the preceding 12 months; or The candidate is a new Associate Circuit Judge Candidate (incumbent state judicial candidates file with the Supreme Court).			 Candidate is not required to file a PFD/Financial Interest Statement (proceed to part 4) A candidate is not required to file a PFD/Financial Interest Statement if (only one must apply): The political subdivision's annual operating budget is \$1 million or under; or The political subdivision's annual operating budget is over \$1 million and the subdivision has a conflict of interest ordinance on file with the MEC that does not require a candidate running for this position to file (note: if a candidate, their spouse, child(ren), parents, or a business in which they own a substantial interest has had a business transaction with the subdivision, candidate may still need to file); or The office sought by the candidate is political party committeeman or committee woman. 			
 If the PFD/Financial Interest Statement is not filed by <u>January 14, 2025</u> (14 days after the closing date of candidate filing for the election), candidate will be assessed a \$10 per day late fee for each day the report is late. If the PFD/Financial Interest Statement is not filed by <u>January 21, 2025</u> (21 days after the closing date of candidate filing for the election), candidate will be disqualified as a candidate and their name will be removed from the ballot. NOTE: If the political subdivision has a conflict of interest ordinance with the MEC: And if filing deadlines are not met, penalties (if any) are assessed by the political subdivision in accordance with its ordinance. Candidate must also file a copy of their PFD/Financial Interest Statement with the governing body/subdivision. 						
Part Four: Acknowledgement (completed by candidate and witnessed by election official)						
I,						
Signature of candidate			Candidate's email address			

Signature of election official (witness) Date Rev. 05/2023



Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, pfdonline@mec.mo.gov

Office Use:

Financial Disclosure Statement for Political Subdivisions

105.485(4), RSMo

Sta	tement Information (sele	ect one)					
Тур	e: 🗌 New 🔲 Amende	d					
2. Fili	Filing Status & Time Period Covered (select one & insert time period)						
	Newly Appointed/ErIncumbent Candidatwithin 14 days of closin	nployed: file for calendar year e: file from Jan 1 of prior year tog g date for candidacy or the 12-month period before	before start date, o closing date for the closing date fo	g, enter the time period served), due by M due within 30 days candidacy (may be longer than 12-month or candidacy, due within 14 days of closing m/dd/yyyy)	period), due		
90000000	er Information						
Filer'	s name (First, Middle, Last)		Spouse'	s name (First, Middle, Last)			
—— Maili	Mailing address		City, Sta	City, State, Zip			
Depe	ndent child's name* (First, Middle, Las	t)	Depend	Dependent child's name* (First, Middle, Last)			
Name	e of Political Subdivision or State Agend	су	Title (Position/Office Seeking)				
				PFD, this statement MUST disclose his/her infor			
*Inc	ludes all children, stepchildren, foster o	children and wards under the age of eightee	n residing in the person'	s household and who receive in excess of 50% of their sup	port from the person.		
Α.		political subdivision listed ab		er any relative within the first degree on ecompensation received as an employee, payn			
	Date (mm/dd/yyyy)	Parties involved in transaction					
B. List the transactions for any business entity, in which you, your spouse, or dependent child(ren that conducted business with the political subdivision listed above valued at more than \$500. It fees or penalties due to the political subdivision or transactions involving payment for providing utility service to the proposition of Note: Substantial interest includes ownership of 10% of the business entity or interest valued at \$100 salary, gratuity or other compensation of \$5,000 or more is paid per calendar year).				ralued at more than \$500. Do not includer providing utility service to the political subdiv	e payments of taxes, vision or transfers for		
	Date (mm/dd/yyyy)	Name of Business		Parties involved in transaction			
	Date (mm/dd/yyyy)	Name of Business	- William Andrews	Parties involved in transaction			
S G G	nature (select one, sign 8	date) 2					
Filer'	s Signature (Required)			Date (mm/dd/yyyy)			

NOTE: The following information is required from the Chief Administrative Officer and Chief Purchasing Officer <u>only</u>. Include information for filer, spouse and dependent child(ren). 6. **Employment** List the name and address of each employer from whom you, your spouse, or dependent child(ren) received income of \$1,000 or more during the time period covered by this statement. **Employer Name** Employer Address/City/State/Zip Person's name whom received income **Employer Name** Employer Address/City/State/Zip Person's name whom received income 7. Sole Proprietorships List each sole proprietorship owned by you, your spouse or dependent child(ren) during the time period covered by this statement. Sole Proprietorship Address/City/State/Zip Sole Proprietorship Name Sole Proprietorship Name Sole Proprietorship Address/City/State/Zip **General Partnerships, Joint Ventures** List each general partnership and joint venture in which you, your spouse or dependent child(ren) were a partner or participant, and the names of partners or co-participants, unless such names and addresses are filed with the Secretary of State, during the time period covered by this statement. Address/City/State/Zip Nature of Business Partner/Coparticipant's Name & Address Party Involved General Partnership or Joint Venture Name Address/City/State/Zip Nature of Business Party Involved General Partnership or Joint Venture Name Partner/Coparticipant's Name & Address 9. Stocks, Bond & Other holdings EXCEPTION: Interest in any qualified plan or annuity pursuant to the Employees Retirement Income Security Act (ERISA) is not required to be listed. Limited Partnerships, Closely-held Corporations: List the name of any closely-held corporation/limited partnership in which you, your spouse, or dependent child(ren) own ten percent (10%) or more of any class of the outstanding stock or units during the time period covered by this statement. Limited Partnership/Closely-held Corporation Name Address/City/State/Zip Nature of business Party Involved Limited Partnership/Closely-held Corporation Name Address/City/State/Zip Nature of business Party involved B. Publicly Traded Corporation or Limited Partnership: List the name of any publicly traded corporation or limited partnership which is listed on a regulated stock exchange or automated quotation system in which you, your spouse or dependent child(ren) own two percent (2%) or more of any class of outstanding stock, units or other equity interests during the time period covered by this statement. Corporation/Limited Partnership Name Party Involved

10. Corporations

Corporation/Limited Partnership Name

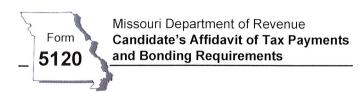
List the name and address of each corporation for which you, your spouse, or dependent child(ren) served in the capacity of a director, officer or receiver during the time period covered by this statement.

Party Involved

Corporation Name
Corporation Address/City/State/Zip
Person's name who served in this capacity

Corporation Name
Corporation Address/City/State/Zip
Person's name who served in this capacity

This form is required to be filed with the Missouri Ethics Commission and with the governing body of your political subdivision. All elected and appointed officials as well as employees of a political subdivision must comply with §105.454 RSMo., on conflicts of interest and their own local code of ethics.



First Name	Middle	Name	Last Name	
Social Security Number	County	of Residence	Telephone Number*	_
Street Address*		City	State	Zip Code
Elected Office Candidate is Seeking		E-mail Address		

gnature

Declaration under <u>115.306</u>, <u>RSMo</u>: I hereby declare under penalties of perjury that I am not currently aware of any delinquency in the filing or payment of any state income taxes, personal property taxes, municipal taxes, real property taxes on the place of residence, as stated on my declaration of candidacy, or that I am not a past or present corporate officer of any fee office that owes any taxes to the state, other than those taxes which may be in dispute. I declare under penalties of perjury that I am not aware of any information that would prohibit me from fulfilling any bonding requirements for the office for which I am filing.

Signature	Date (MM/DD/YYYY)
	/

Notary Information

Embosser or black ink rubber stamp seal	Subscribed and sworn before me, this			
	day of year			
	State County (or City of St. Louis) N		My Commission Expires (MM/DD/YYYY)	
	МО	Saint Charles	0 6 /0 9 /2 0 2 6	
	Notary Public Signature			
	Notary Public Name (Typed or Printed)			
	Jane Ola Hepler			

Please review 115.306, RSMo. A failure to comply may disqualify you from the ballot. Upon request by the Department of Revenue, the candidate shall provide a copy of tax receipts for the candidate's personal property, municipal, and real property taxes, and any other information necessary to demonstrate compliance with 115.306, RSMo.

Form 5120 (Revised 08-2015)

Mail to: Mis

Missouri Department of Revenue General Counsel's Office

P.O. Box 475

Jefferson City, MO 65105

Phone: (573) 751-4450

TTY: (800) 735-2966 Fax: (573) 751-7151 Visit http://dor.mo.gov/personal/candidates. for additional information.

