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

LINFORMATION IS REQUIRED TO BE PROVIDED	UNLESS INDI	CATED AS	hool Bo	L ¹ Failure to	provide required			
APPLICATION FOR A PLACE O	N THE CS	130 30	, , ,	aiu .		GENER	RAL ELECTIC	ON BALLOI
TO: City Secretary/Secretary of Board (name of election) I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.								
							elow.	
FULL NAME (First, Middle, Last)	i lace o			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*				
Kimberly Kirkham McAdams				Kimberly McAdams				
	1 1 202	D 1	I D 16					
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) 1112 Finney				PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)				
CITY	STATE	ZIP		CITY			STATE	ZIP
College Station	TX	7784	5					
PUBLIC EMAIL ADDRESS (Optional) (Address	for OCCUPA	ATION (D	o not lea	ve blank) DATE OF BIRTH		Н		TRATION VUID
which you receive campaign related emails, if available.		eerna C	Consulta			,1969	NUMBER ² (Optional)	
kirkham_mcadams@yahoo.cor TELEPHONE CONTACT INFORMATION (Opt		eering C	Jonaula	IIL	00 / 03	/ 1000	l	
		ilaa.				Call. (5	12) 431-761	2
Home: FELONY CONVICTION STATUS (You MUST o		ice:	LENGTH	OF CONTIN	UOUS RESIDENCI			ION WAS SWORN
I have not been finally convicted of a f	•			THE STATE (PRECINCT FROM
I have been finally convicted of a felor		heen		4.4			E OFFICE SOUGHT IS ELECTED	
pardoned or otherwise released from		been		14	year(s)			
disabilities of that felony conviction ar		ided		7 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			•					
my nickname does not constitute a slogan been commonly known by this nickname fo								
Election Code regarding the rules for how n					rease review se	C. C	., J2.032 and J	2.000 of the rexas
Before me, the undersigned authority, on t					_{late)} Kimberly	McAdams	,	, who
being by me here and now duly sworn, upo	in oath says:							
"I, (name of candidate) Kimberly McAdams being a candidate for the office of CSISD School Board Trustee,				of Brazos County, Texas,			ty, Texas,	
being a candidate for the office of <u>CSIS</u>	SD School E	Board T	rustee, l	Place 5	swear that I	will support	and defend the	e Constitution and
laws of the United States and of the State of	of Texas. I am	a citizen	of the Ur	nited States	eligible to hold s	such office u	nder the consti	tution and laws of
this state. I have not been determined by a mentally incapacitated without the right to								
mentally incapacitated without the right to any prior felony conviction, and if so convic	ted must pro	vide proc	of that I ha	ave been pa	rdoned or other	wise release	from the resu	liting disabilities of
any such final felony conviction. I am awar	re that knowir	ngly prov	iding false	e informatio	n on the applica	ation regardi	ng my possible	felony conviction
status constitutes a Class B misdemeanor. I								
X								
SIGNATURE OF CANDIDATE								
Sworn to and subscribed before me this the	25 day o	of $_{_}$ $_{]}$	Tuly		022 by	Kimt	erly N	IcAdams
	(day)		(month)		(year)	(r	name of candida	ate)
Signature of Officer Authorized to Administer Oath Princed Name of Officer Authorized to Administer Oath						er Oath		
Administrative Assistant Title of Officer Authorized to Administer Oath						Notary STATE OF	Public	þ
		TION IS	ACCOMP	ANIED BY	HE REQUIRED	FILLING FEED	MADDING ADRA	PAID BY:
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY HE RECURED BLING FED (MADDRESSE) 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								
/ / / (See Section 1.007)								
Date Received Date Accepted Signature of Filing Officer or Designee								

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

	See	1 Total pages filed:				
2	CANDIDATE	MS/MRS MR FIRST MI	OFFICE USE ONLY			
	NAME	Kimberly K.	Filer ID #			
		NICKNAME LAST SUFFIX	Date Received			
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	7-75			
	let lyda engles, t	10.10 at a complete a resident goderna 177845	Date Hand-delivered or Postmarked			
4	CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt# Amount\$			
		(512) 431-7612	Date Processed			
5	OFFICE HELD (if any)	csiso school Board Trustee	Date Imaged			
6	OFFICE SOUGHT (if known)	CSISD School Board Trustee				
7	CAMPAIGN TREASURER NAME	Jennifer L. Ford	LAST SUFFIX			
8	CAMPAIGN	STREET ADDRESS; APT / SUITE #; CITY;	STATE; ZIP CODE			
	TREASURER STREET ADDRESS	2444 Stone Castle Cit, College St	Tation TX 77845			
(residence or business)					
9	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION				
	TREASURER PHONE	(979) 229 - 6442				
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	xas Government Code.			
		I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of			
		I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.				
		# 2	22 July 2022			
		Signature of Candidate	Date Signed			
GO TO PAGE 2						

CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFIC	E USE ONLY
Date Received	
7.75	1021
Date Hand-delivere	d or Postmarked
Date Processed	
Date Imaged	Effect of the

(Ethics Commission Filers)	CANDIDATE CANDIDATE	POLITICAL COMMITTEE			
paid of exception livelial as one-story seeks	If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.	If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.			
3 NAME OF CANDIDATE (PLEASE TYPE OR PRINT)	TITLE (Dr., Mr., Ms., etc.) FIRST Mrs. Kimberly NICKNAME LAST McAdams	SUFFIX (SR., JR., III, etc.)			
4 TELEPHONE NUMBER OF CANDIDATE (PLEASE TYPE OR PRINT)	AREA CODE PHONE NUMBER (512) 431-7612	EXTENSION			
5 ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT)	STREET/POBOX; APT/SUITE#; CI	TY: STATE: ZIPCODE Station/TX 77.845			
6 OFFICE SOUGHT BY CANDIDATE (PLEASE TYPE OR PRINT)	CSISD School boo	ard trustee			
7 NAME OF COMMITTEE (PLEASE TYPE OR PRINT)					
8 NAME OF CAMPAIGN TREASURER (PLEASE TYPE OR PRINT)	TITLE (Dr., Mr., Ms., etc.) FIRST	MI			
(I LEAGE TIPE O'N FRIET)	NICKNAME LAST	SUFFIX (SR., JR., III, etc.)			
GO TO BAGE 2					