

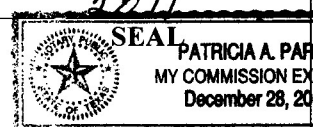
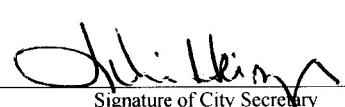


RECEIVED  
 OCT 4 2011  
 LEWISVILLE  
 CITY SECRETARY'S

All information is required to be provided unless indicated as optional.

|   |                    |   |  |  |  |
|---|--------------------|---|--|--|--|
| <b>APPLICATION FOR A PLACE ON THE CITY OF <u>Lewisville</u> GENERAL ELECTION BALLOT</b>   |                    |   |  |  |  |
| TO: City Secretary  |                    |   |  |  |  |
| 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.<br><u>Lewisville City Council, Place No. 2.</u>  |                    |   |  | INDICATE TERM<br><input type="checkbox"/> FULL <input checked="" type="checkbox"/> UNEXPIRED |  |
| FULL NAME (First, Middle, Last)<br><u>Matthew Leander Lampe</u>   |                    |   | PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT<br><u>Matt Lampe</u> |  |  |
| PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.)<br><u>1243 Krista Ct.</u>  |                    |   | MAILING ADDRESS (If different from residence address)                  |  |  |
| CITY<br><u>Lewisville</u>   | STATE<br><u>TX</u> | ZIP<br><u>75056</u>   | CITY   | STATE  | ZIP  |
| EMAIL ADDRESS (Optional)<br><u>LampeforLewisville@gmail.com</u>   |                    | OCCUPATION (Do not leave blank)<br><u>Veterinarian</u>      | DATE OF BIRTH<br><u>10/06/1972</u>                                     | VOTER REGISTRATION VOID NUMBER (if applicable)<br><u>1050017608</u>                          |  |
| TELEPHONE NUMBER (Include area code) (Optional)<br>OFFICE:<br>HOME: <u>469 579 5307</u>   |                    | Length of Continuous Residence as of Date Application Sworn |  |  |  |
|   |                    | IN STATE<br><u>9</u> yr(s)<br><u>5</u> mos                  | IN CITY<br><u>1</u> yr(s)<br><u>2</u> mos                              | IN DISTRICT OR PRECINCT<br><u>1</u> yr(s)<br><u>2</u> mos                                    |  |
| 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>Matthew L. Lampe</u> , who being by me here and now duly sworn, upon oath says: "I, (name) <u>Matthew L. Lampe</u> , of <u>Denton</u> County, Texas, being a candidate for the office of <u>Lewisville City Council place No. 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."   |                    |   |  |  |  |
| <br>SIGNATURE OF CANDIDATE  |                    |   |  |  |  |
| Sworn to and subscribed before me at <u>LEWISVILLE</u> , this the <u>4TH</u> day of <u>OCTOBER</u> <u>2011</u>  |                    |   |  |  |  |
| <br>Signature of Officer administering oath <sup>2</sup>   |                    | <u>NOTARY PUBLIC</u><br>Title of Officer administering oath |  |         |  |
| TO BE COMPLETED BY CITY SECRETARY:<br>(See Section 1.007)   |                    |   | <u>10/4/2011</u><br>Date Received                                      |  | <br>Signature of City Secretary |