AW24
Prescribed by Secretary of State
Sections 141.031, 172.028, Texas Election Code
2004

All information is required to be provided unless indicated as optional. (Es requisito suministrar la información solicitada a menos que haya indicado lo contrario.)

APPLICATION FOR Precinct CHAIR ON THE Republican PARTY GENERAL PRIMARY BALLOT
(SOLICITUD PARA EL PRESIDENTE DEL _____ EN LA BOLETA DE LA PRIMARIA GENERAL DEL PARTIDO _____)
TO: County Clerk
(A: Secretario del Condado)

I request that my name be placed on the above-named official primary ballot as a candidate for election to the office indicated below.
(Solicito que mi nombre sea puesto en la papeleta oficial de esta primaria como candidato para la elección de puesto oficial indicado abajo.)

OFFICE SOUGHT (PUESTO OFICIAL SOLICITADO) Include any place number or other distinguishing number, if any. (Incluya cualquier número de lugar u otro número que haya si puesto oficial lo requiere, si hay aplicable.)	INDICATE FULL OR UNEXPIRED TERM (INDIQUE SI EL TERMINO DEL PUESTO OFICIAL ES COMPLETO O NO CONCLUIDO)
Precinct Chairman #130	Full

FULL NAME: (First, Middle, Last) (NOMBRE COMPLETO) (Nombre de Pila, Segundo Nombre, Apellido)	PARTY NAME AS YOU WANT IT TO APPEAR ON THE BALLOT (NOMBRE QUE DESEA COMO SIGNA QUE APAREZCA EN LA BOLETA)
Susan E. Bartlemay	Susan Bartlemay

PERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) (DIRECCIÓN DE RESIDENCIA PERMANENTE: Calle y Número de Departamento, si tiene, describa la localidad de su residencia. No incluya un apartado o ruta rural.)	MAILING ADDRESS (If different from residence address) (DIRECCIÓN POSTAL (Si es diferente a la dirección de residencia))
400 Hampton Dr.	SAME

CITY (CIUDAD)	STATE (ESTADO)	ZIP (Código Postal)	CITY (CIUDAD)	STATE (ESTADO)	ZIP (Código Postal)
Allen	TX	75013			

OCCUPATION (Do not leave blank) (OFICIO) (No lo deje en blanco)	DATE OF BIRTH (FECHA DE NACIMIENTO)	COUNTY OF RESIDENCE (CONDADO DE RESIDENCIA)
Pharmacist	12-14-46	Collin

TELEPHONE NUMBER (Include area code) (Optional) (NÚMERO DE TELÉFONO (Incluya el código de área) (Opcional))	Length of Continuous Residence as of Date Application Signed (Tiempo en que ha residido como vecino. Debe llenar en la fecha en que firmó la solicitud.)		
OFFICE: (DE OFICINA) 214-987-0452	IN STATE (DEL ESTADO) 45 years (años) 10 months (meses)	IN COUNTY (DEL CONDADO) 30 years (años) 6 months (meses)	IN DISTRICT OR PRECINCT (DEL DISTRITO O PRECINTO) 22 years (años) 6 months (meses)
HOME: (DE SU DOMICILIO) 972-396-1923			

If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statement: 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. [illegible]

Susan Bartlemay

Before me, the undersigned authority, on this day personally appeared (name) Susan Bartlemay who being by me duly sworn, upon oath says: "I, (name) Susan Bartlemay, of Collin County, Texas, being a candidate for the office of Precinct Chairman #130, 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 regulation law, Chapter 323, Government Code.

I further swear that the foregoing statements included in my application are in all things true and correct."

[illegible]

X Susan Bartlemay
SIGNATURE OF CANDIDATE (FIRMA DEL CANDIDATO)

My Commission Expires 9/18/10

Sworn to and subscribed before me at Fed Ex Office, this the 4th day of January 2010
(Jurado y suscrito ante mí en _____, condado de _____, el _____ de _____)

Philip S Maclin Jr.
Signature of Officer administering oath
(Firma del oficial administrador de juramento)

Texas Notary
Title of Officer administering oath
(Título del oficial administrador de juramento)

PHILIP S MACLIN JR
My Commission Expires
September 18, 2010

TO BE COMPLETED BY CHAIR:
(See Section 1.007)

1/4/2010
Date (Fecha)

Signature of Chair