ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE Judson ISN

GENERAL ELECTION BALLOT

TO: City Secretary/Secretary of Board

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.)

Board of Trustees	- Tuds	ON ISO-PL.	UNEXPIRED	PALIOT ¹
Penée A Paschall		Revée A.	Paschal	
REPORT RESIDENCE ADDRESS (Do not include a Route. If you do not have a residence address, des at which you receive personal mail and location of reaching the residence address.)	cribe the address			
Converse Tx. 78109		PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)		
CODYPASSE. TX	78 109	<u> Converse</u>	TX	78109
CITY STATE TELEPHONE CONTACT INFORMATION (Optional)	ŽIP	CITY 0110)954 STATE	ZIP
Home: (7 (2) (438 771 78 771)		red	NOTED DEC	ucto ationi 1/1110
Cell:				
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