Ballot Name:

Office Sought: (Include Place/District, if applicable)

1st Reviewer: 2nd Reviewer:

| **Item** | **1st** | | **2nd** |
| --- | --- | --- | --- |
| Enter **Date Received** (located at bottom of application in section to be completed by chair) - you can add a line for **“Date Accepted”** to enter the date you actually accept the application after review |  | |  |
| APPLICATIONFOR **County OR Precinct Chair** ON THE **Republican** PARTY GENERAL PRIMARY BALLOT. |  | |  |
| **Office Sought** – Distinguishing number (Place, District, etc.) included, if applicable. |  | |  |
| **Full Name** – First, Middle, Last |  | |  |
| **Print Name As You Want It To Appear on the Ballot** |  | |  |
| **Permanent Residence Address** – Cannot be a PO Box or Rural Route. Street, city, state, and zip. Legal description, if property has no address. |  | |  |
| **Public Mailing Address** – Address, for which you receive campaign related correspondence. Can be a PO Box. |  | |  |
| **Public Email Address** – if available |  | |  |
| **Occupation** – CANNOT BE BLANK |  | |  |
| **Voter Registration VUID Number –** Optional. Qualified (registered) voter of County or Precinct as applicable by the filing deadline |  | |  |
| **Date of Birth** –. Must be 18 years of age or older. Born on or before 12/11/1999. |  | |  |
| **Contact Information -** Optional |  | |  |
| **Length of Continuous Residence (In State and In Precinct)** **as of Date Application Sworn**   * Cannot be blank | |  |  |
| **Oath of Office**   * Name (twice) * County of permanent residence * Office sought, distinguishing number, if applicable * Signature | |  |  |
| **Notarized**   * City, TX; or County, TX; or time of day & location * Date, month, year * Notary’s signature, title, and stamp * Notary term not expired on date signed.   + If not notarized or notary expired prior to date signed, reject application. | |  |  |
| **For County Chair with population of 300,000 (based on 2016 census estimate) or more Petition Verified** – Pages must be grouped by circulator and numbered accordingly.   * Count number of pages and signatures.   + Minimum number of signatures is based on 10% of incumbent precinct chairs serving on the County Executive Committee | | # of Pages  \_\_\_\_\_\_  Signatures  \_\_\_\_\_\_ | # of Pages  \_\_\_\_\_\_  Signatures  \_\_\_\_\_\_ |
| **After Ballot Review and Petitions Reviewed (as applicable) and Application Accepted**   * Date and County Chair signs. | |  |  |
| **Enter Candidate Data into SOS website** | |  |  |
| **Confirm Candidate Info Correct on SOS Website** | |  |  |