



City of Hudson

APPLICANT INFORMATION

Applicant's Name TERRY TALIAFERRO

Applicant's Phone Number 936-676-6959

Applicant's Address 6082 TED TROUT DR

HUDSON, TX 75904

Applicant's Email Address defendedbear@yahoo.com

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

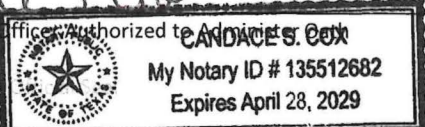
FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.		1 Total pages filed:	
2 CANDIDATE NAME	MS / MRS / MR <u> </u>	FIRST <u>Terry</u>	MI <u>L</u>
	NICKNAME	LAST <u>Taliaferro</u>	SUFFIX
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	<u>6082 Ted Trout Dr. Lufkin TX 75904</u>		
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<u>(936)</u>	<u>676-6959</u>	
5 OFFICE HELD (if any)	MAYOR		
6 OFFICE SOUGHT (if known)	MAYOR		
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
		<u>NA</u>	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	<u>NA</u>		
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	<u>()</u>		
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.		
	I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.		
	I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.		
	<u>Terry Taliaferro</u> Signature of Candidate		<u>2/11/26</u> Date Signed

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

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>City of Hudson</u> GENERAL ELECTION BALLOT					
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.					
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) Mayor				INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED	
FULL NAME (First, Middle, Last) Terry Taliaferro			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* Terry Taliaferro		
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.) 6082 Ted Trout Dr			PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)		
CITY Hudson	STATE TX	ZIP 75904	CITY <u>Huffman</u>	STATE <u>TX</u>	ZIP <u>75904</u>
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)		OCCUPATION (Do not leave blank) Retired	DATE OF BIRTH <u>5/4/60</u>	VOTER REGISTRATION VUID NUMBER² (Optional)	
TELEPHONE CONTACT INFORMATION (Optional) Home: (936) 875-2199 Office: Cell: (936) 676-6959					
FELONY CONVICTION STATUS (You MUST check one)			LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN		
<input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³			IN THE STATE OF TEXAS <u>65</u> year(s) <u>8</u> month(s)		IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED <u>37</u> year(s) <u>7</u> month(s)
*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 or contain a title, 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. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>Terry Taliaferro</u> , who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>Terry Taliaferro</u> , of <u>Angi</u> County, Texas, being a candidate for the office of <u>Mayor</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 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 am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."					
X <u>Terry Taliaferro</u> SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this the <u>11th</u> day of <u>February</u> , <u>2020</u> , by <u>Terry Taliaferro</u> (day) (month) (year) (name of candidate)					
<u>Candace S. Cox</u> Signature of Officer Authorized to Administer Oath ⁴			<u>Candace S. Cox</u> Printed Name of Officer Authorized to Administer Oath		
<u>City Secretary</u> Title of Officer Authorized to Administer Oath					
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:					
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE.					
This document and \$ _____ filing fee or a nominating petition of _____ pages received. <input type="checkbox"/> Voter Registration Status Verified					
_____/_____/_____ Date Received		_____/_____/_____ Date Accepted		_____ Signature of Filing Officer or Designee	