Prescribed by Secretary of State
Sections 141.031, 141.039, 172.021, 172.022, 172.023, 172.024, Texas Election Code
08/2025



APPLICATION FOR A PLACE ON THE GENERAL PRIMARY BALLOT BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information m

INFORMATION IS REQUIRED TO BE PROVIDE								
APPLICATION FOR A PLA	ACE ON THE		oublican		ENEKAL	PRIMARY BA	ALLU1	
To: State/County Chair I request that my name be placed on the	ahovo nama		ic or Republica		mination to	the office inc	licated below	
				BENT DECLARATION: (Check this				
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)			hox if			f you are the incumbent.)		
Cochran County and District	FULL UNEXPIRED INCUMBENT							
FULL NAME (First, Middle, Last)	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*							
Lisa Ann Smith	Lisa Timmons-Smith							
PERMANENT RESIDENCE ADDRESS (Do r	ot include a P.	O. Box or Rural	PUBLIC MAI	LING ADDRESS (O	ptional) (Add	dress at which yo	ou receive campaign	
Route. If you do not have a residence address,				pondence, if availab	le.)			
546 CR 45			546 CR 4	15				
CITY	STATE	ZIP	CITY			STATE	ZIP	
Morton	Texas	79346	Morton			Texas	79346	
				r				
PUBLIC EMAIL ADDRESS (Optional) (Addres	S OCCUPA	ATION (Do not I	eave blank)	DATE OF BIRTH			STRATION VUID	
at which you receive campaign related emails, if available.)	Cour	nty and Dis	trict Clerk	03 / 25	/ 1973	NUMBER ² (O	puoliai)	
TELEPHONE CONTACT INFORMATION (O)		ity and bis		00 / 20	7 .5.5	A		
		000 00	C E A E O		- " O	06-893-56	02	
Home: 806-927-5385		fice: 806-26		OLIC PECIPENCE				
ELONY CONVICTION STATUS (You MUST							TION WAS SWORN	
I have not been finally convicted of a felony.			IN THE STATE	OF IEXAS	20.5	IN TERRITORY/DISTRICT/PRECINCT FROM		
I have been finally convicted of a felony, but I have been			_ <u>52_</u> year(s)			WHICH THE OFFICE SOUGHT IS ELECTED		
pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided		ad	_OZ_ year(s)		<u> </u>			
proof of this fact with the submission of this application. ³			8	month(s)		8 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							I further swear tha	
my nickname does not constitute a slogan	or contain a ti	tle, nor does it i	ndicate a polit	ical, economic, soc	ial, or religi	ous view or aff	iliation. I have bee	
commonly known by this nickname for at I	east three yea	rs prior to this e	lection. Please	review Sections 5	2.031, 52.03	32 and 52.033 o	of the Texas Electio	
Code regarding the rules for how names r	nay be listed o	n the official ba	llot.					
Before me, the undersigned authority, on	this day perso	nally appeared	(name of cand	idate)LIS	a Timmo	ons-Smith	, who being	
by me here and now duly sworn, upon oa								
	Timmons-		, of	Cochi			ty, Texas,	
being a candidate for the office of COC	nran Cour	nty and Dis	trict Clerk	swear that I will ر	support and	d defend the Co	onstitution and law	
of the United States and of the State of T	exas. I am a c	itizen of the Un	ited States eli	gible to hold such	office unde	r the constitut	ion and laws of th	
state. I have not been determined by a fin	al judgment of	a court exercisi	ng probate juri	sdiction to be total	lly mentally	incapacitated (or partially mental	
incapacitated without the right to vote. I	am aware of t	he nepotism la	w, Chapter 573	3, Government Co	de. I am av	ware that I mus	st disclose any pri	
felony conviction, and if so convicted, mu	st provide pro	of that I have be	en pardoned	or otherwise relea	sed from th	ne resulting dis	abilities of any suc	
final felony conviction. I am aware that	knowingly pro	oviding false inf	ormation on	ne application re	garding my	possible felon	y conviction stati	
constitutes a Class B misdemeanor. I furt	ner swear that	the foregoing s	tatements inc	uded in my applica	ation are in	all things true	and correct.	
			X	100 . NI	WATE.			
y		,	CICNATU	RE OF CANDIDATI	 			
	C210	. 4 2.10:-		PASS 1	Lisa c	5.4. 10-	*	
Sworn to and subscribed before me this t				(va=1)		name of candid	(ata)	
No and	(day)	(mor	-	CUEDY		iarrie or candio	iale)	
Cheryl Buller			(ARY POR	UNERYL J. B	UTLER	ß		
Signature of Officer Authorized to Admini	ster Oath ⁴			nted Nangare 60 ffi	EXAGuthori	zed to Adminis	ter Oath	
Aertinos Admin				ID#68758		ß		
Title of Officer Authorized to Administer (Dath		OF TEN	My Comm. Expires	12-20-2025	_₽		
TO BE COMPLETED BY CHAIR OR SECRI		E COUNTY EXE	CUTIVE CON	MITTEE: THIS A	PPLICATIO	N IS ACCOMP	ANIED BY THE	
REQUIRED FILING FEE PAID BY:								
CASH CHECK MONEY ORDER	CASHIER	S CHECK OR	PETITION IN	LIEU OF A FILING	FEE X V	oter Registrat	ion Status Verifie	
This document and \$ 150° filing fe		- 6	e received					
	e or petition	or <u> </u>	s received.	(See Section	1 0 4	4		
11/08/2025				form H D	Chomed	1		
Date Filed		5	Signatu	e of Chair or Des	signee Rece	eiving Filed Ap	plication	
1/ /08 / 2015 or//			<	then H &	chrone	#		
Date Accepted Date Rejecte	d		Signate	re of Chair or Sec	retary Upo	n Determinati	on of Application	