

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE City of Columbus 2021 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.) <u>Place 2 City Council - Columbus</u>	INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED
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FULL NAME (First, Middle, Last) <u>MICHAEL DAVID RIDLAW DVM</u>	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT <sup>1</sup> <u>MICHAEL DRIDLAW DVM</u>
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PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.) [Redacted] <u>Columbus Tx 78934</u>	PUBLIC MAILING ADDRESS (Campaign mailing address, if available.) <u>Same</u>
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CITY <u>Columbus</u>	STATE <u>Tx</u>	ZIP <u>78934</u>	CITY <u>Columbus</u>	STATE <u>Tx</u>	ZIP <u>78934</u>
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PUBLIC EMAIL ADDRESS (If available) <u>CVV5@SABCELOCAL.net</u>	OCCUPATION (Do not leave blank) <u>Veterinarian</u>	DATE OF BIRTH [Redacted]	VOTER REGISTRATION VOID NUMBER (Optional) <sup>2</sup>
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TELEPHONE CONTACT INFORMATION (Optional) Home:  Work:  Cell:	LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN	
	IN STATE <u>54</u> year (s)	IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED <sup>3</sup> <u>20</u> year (s)
	<u>9</u> month(s)	<u>1</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 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.

Before me, the undersigned authority, on this day personally appeared (name) MICHAEL DRIDLAW DVM who being by me here and now duly sworn, upon oath says:

"I, (name) MICHAEL DRIDLAW DVM, of Colorado County, Texas, being a candidate for the office of Place 2 City Council - Cd., 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 nepotism law, Chapter 573, Government Code.

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

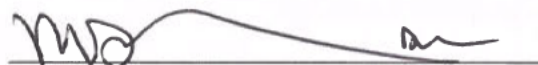
X [Signature]  
 SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at <u>6:20pm</u> , this the <u>8th</u> day of <u>Feb.</u> , <u>2021</u>	SEAL
<u>[Signature]</u> Signature of Officer Administering Oath <sup>4</sup>	
<u>City Secretary</u> Title of Officer Administering Oath	

TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD: (See Section 1.007)	<u>2/10/2021</u> Date Received	<u>[Signature]</u> Signature of Secretary
Voter Registration Status Verified <input checked="" type="checkbox"/>		

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.		1 Total pages filed:  5	
2 CANDIDATE NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
	Dr.	MICHAEL	D
		RIDEAN	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	<div style="background-color: black; width: 100px; height: 20px; display: inline-block;"></div> Columbus TX 78934		
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(979) 732-9981		
5 OFFICE HELD (if any)	Place 2 City Council		
6 OFFICE SOUGHT (if known)	same		
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI NICKNAME LAST SUFFIX
	Dr.	MICHAEL	D RIDEAN
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
	<div style="background-color: black; width: 100px; height: 20px; display: inline-block;"></div> Columbus TX 78934		
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(979) 732-9981		
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p>		
	 Signature of Candidate		2-8-21 Date Signed
GO TO PAGE 2			

**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

11 CANDIDATE  
NAME

DR. MICHAEL DRISSEN

12 MODIFIED  
REPORTING  
DECLARATION

**COMPLETE THIS SECTION ONLY IF YOU ARE  
CHOOSING MODIFIED REPORTING**

**\*\* This declaration must be filed no later than the 30th day before  
the first election to which the declaration applies. \*\***

**\*\* The modified reporting option is valid for one election cycle only. \*\***  
(An election cycle includes a primary election, a general election, and any related runoffs.)

**\*\* Candidates for the office of state chair of a political party  
may NOT choose modified reporting. \*\***

I do not intend to accept more than \$930 in political contributions  
or make more than \$930 in political expenditures (excluding filing  
fees) in connection with any future election within the election  
cycle. I understand that if either one of those limits is exceeded, I  
will be required to file pre-election reports and, if necessary, a  
runoff report.

2021

Year of election(s) or election cycle to  
which declaration applies



Signature of Candidate

**This appointment is effective on the date it is filed with the appropriate filing authority.**

TEC Filers may send this form to the TEC electronically at [treasappoint@ethics.state.tx.us](mailto:treasappoint@ethics.state.tx.us)  
or mail to  
Texas Ethics Commission  
P.O. Box 12070  
Austin, TX 78711-2070

**Non-TEC Filers must file this form with the local filing authority  
DO NOT SEND TO TEC**

For more information about where to file go to:  
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>



ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE CITY OF COLUMBUS 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.) <u>CITY COUNCIL PLACE 2</u>	INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED
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FULL NAME (First, Middle, Last) <u>RONNY RAY DALEY</u>	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT <sup>1</sup> <u>BONNY RAY DALEY</u>
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PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.) [REDACTED]	PUBLIC MAILING ADDRESS (Campaign mailing address, if available.) <u>714 SPRING ST</u>
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CITY <u>COLUMBUS</u>	STATE <u>TX</u>	ZIP <u>78934</u>	CITY <u>COLUMBUS</u>	STATE <u>TX</u>	ZIP <u>78934</u>
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PUBLIC EMAIL ADDRESS (If available) <u>ronnyraydaley@gmail.com</u>	OCCUPATION (Do not leave blank) <u>METAL RECYCLING</u>	DATE OF BIRTH [REDACTED]	VOTER REGISTRATION VOID NUMBER (Optional) <sup>2</sup>
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TELEPHONE CONTACT INFORMATION (Optional) Home: <u>979-732-0295</u> Work: Cell:	LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN	
	IN STATE <u>56</u> year (s) <u>3</u> month(s)	IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED <sup>3</sup> <u>48</u> year (s) ____ 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 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.

Before me, the undersigned authority, on this day personally appeared (name) RONNY RAY DALEY, who being by me here and now duly sworn, upon oath says:

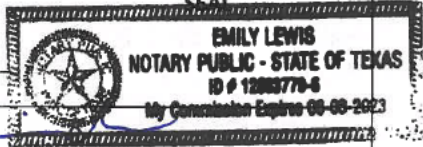
"I, (name) RONNY RAY DALEY of COLORADO County, Texas, being a candidate for the office of CITY COUNCIL, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution 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 nepotism law, Chapter 573, Government Code.

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

X [Signature]  
SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at 10:44 a.m., this the 12 day of February, 2021.

[Signature] Signature of Officer Administering Oath<sup>4</sup>  
Notary Title of Officer Administering Oath



TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:  
 (See Section 1.007)  
2/12/2021 Date Received  
[Signature] Signature of Secretary

Voter Registration Status Verified

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

2 1

**OFFICE USE ONLY**

Filer ID #

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

2 CANDIDATE NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

RONNY

RAY

DALEY

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

COLUMBUS TX  
78934

4 CANDIDATE PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(979) 732 0295

5 OFFICE HELD (if any)

N/A

6 OFFICE SOUGHT (if known)

CITY COUNCIL

7 CAMPAIGN TREASURER NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

DAVID

FRANEK

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

COLUMBUS TX 78934

9 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

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.

*Ronny Daley*  
Signature of Candidate

2-12-21  
Date Signed

GO TO PAGE 2

**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

11 CANDIDATE  
NAME

12 MODIFIED  
REPORTING  
DECLARATION

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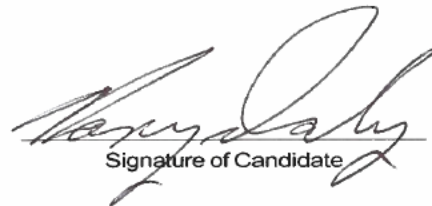
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or make more than \$930 in political expenditures (excluding filing  
fees) in connection with any future election within the election  
cycle. I understand that if either one of those limits is exceeded, I  
will be required to file pre-election reports and, if necessary, a  
runoff report.

2021

Year of election(s) or election cycle to  
which declaration applies



Signature of Candidate

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Texas Ethics Commission  
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<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>