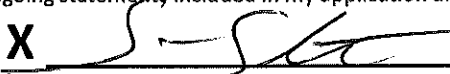
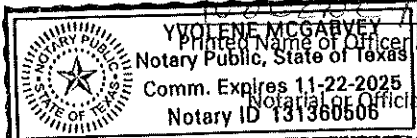


**APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION  
 FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION**

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL<sup>1</sup> Failure to provide required information may result in rejection of application.

|  |                    |  |   |   |     |
|--|--------------------|--|---|---|-----|
| <b>APPLICATION FOR A PLACE ON THE</b> <u>Argyle ISD Board of Trustees</u> <b>GENERAL ELECTION BALLOT</b>   |                    |  |   |   |     |
| 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. <u>Place 3</u>  |                    |  |   |   |     |
| OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)<br><u>Argyle ISD Trustee Place 3</u>  |                    |  | INDICATE TERM<br><input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED  |   |     |
| FULL NAME (First, Middle, Last)<br><u>Samuel Ray Slaton II</u>   |                    |  | PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*<br><u>Sam Slaton</u>   |   |     |
| 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.)<br><u>224 River Meadows Ln</u>   |                    |  | PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)                        |   |     |
| CITY<br><u>Argyle</u>  | STATE<br><u>TX</u> | ZIP<br><u>76226</u>  | CITY  | STATE   | ZIP |
| PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)<br><u>Sam.slaton@argyleisd.com</u>  |                    | OCCUPATION (Do not leave blank)<br><u>CEO Santa Center for Healing</u> |   | DATE OF BIRTH<br><u>05/10/1979</u>  |     |
| VOTER REGISTRATION VOID NUMBER <sup>2</sup> (Optional)<br><u>1091750540</u>  |                    |  |   |   |     |
| TELEPHONE CONTACT INFORMATION (Optional)<br>Home: <u>N/A</u> Office: <u>817-403-1246</u> Cell: <u>817-403-1246</u>   |                    |  |   |   |     |
| FELONY CONVICTION STATUS (You MUST check one)<br><input checked="" type="checkbox"/> I have not been finally convicted of a felony.<br><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. <sup>3</sup>   |                    |  | LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN<br>IN THE STATE OF TEXAS<br><u>34</u> year(s)<br><u>1</u> month(s) |   |     |
|  |                    |  | IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED<br><u>13</u> year(s)<br><u>3</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>Sam Slaton</u> , who being by me here and now duly sworn, upon oath says:<br>"I, (name of candidate) <u>Sam Slaton</u> , of <u>Denton</u> County, Texas, being a candidate for the office of <u>Argyle ISD Board of Trustees</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."<br><div style="text-align: center;"> <br/> <b>X</b><br/>                     SIGNATURE OF CANDIDATE                 </div> |                    |  |   |   |     |
| Sworn to and subscribed before me this the <u>24</u> day of <u>January</u> , <u>2023</u> , by <u>Sam Slaton</u> .<br>(day) (month) (year) (name of candidate)  |                    |  |   |   |     |
| Signature of Officer Authorized to Administer Oath <sup>4</sup><br><u>Yvonne McGarvey</u>  |                    |  | Signature of Officer Authorized to Administer Oath<br><u>Yvonne McGarvey</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:<br><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 \$ <u>NA</u> filing fee or a nominating petition of _____ pages received. <input type="checkbox"/> Voter Registration Status Verified  |                    |  |   |   |     |
| Date Received<br><u>01/24/2023</u>   |                    | Date Accepted<br><u>01/24/2023</u>                                     |   | (See Section 1.007) <u>Yvonne McGarvey</u><br>Signature of Filing Officer or Designee |     |

## INSTRUCTIONS

An application for a place on the general election for a city, school district or other political subdivision, may not be filed earlier than 30 days before the deadline prescribed by this code for filing the application. An application filed before that day is void. All fields of the application **must** be completed unless specifically marked optional.

For an election to be held on a uniform election date, the day of the filing deadline is the 78th day before Election Day.

If you have questions about the application, please contact the Secretary of State's Elections Division at 800-252-8683.

## NEPOTISM LAW

The candidate must sign this statement indicating his awareness of the nepotism law. When a candidate signs the application, it is an acknowledgment that the candidate is aware of the nepotism law. The nepotism prohibitions of chapter 573, Government Code, are summarized below:

No officer may appoint, or vote for or confirm the appointment or employment of any person related within the second degree by affinity (marriage) or the third degree by consanguinity (blood) to the officer, or to any other member of the governing body or court on which the officer serves when the compensation of that person is to be paid out of public funds or fees of office. However, nothing in the law prevents the appointment, voting for, or confirmation of anyone who has been continuously employed in the office or employment for the following period prior to the election or appointment of the officer or member related to the employee in the prohibited degree: six months, if the officer or member is elected at an election other than the general election for state and county officers.

No candidate may take action to influence an employee of the office to which the candidate is seeking election or an employee or officer of the governmental body to which the candidate is seeking election regarding the appointment or employment of a person related to the candidate in a prohibited degree as noted above. This prohibition does not apply to a candidate's actions with respect to a bona fide class or category of employees or prospective employees.

## FOOTNOTES

<sup>1</sup>An application for a place on the ballot, including any accompanying petition, is public information immediately on its filing. (Section 141.035, Texas Election Code)

<sup>2</sup>Inclusion of a candidate's VUID is optional. However, many candidates are required to be registered voters in the territory from which the office is elected at the time of the filing deadline. Please visit the Elections Division of the Secretary of State's website for additional information. <http://www.sos.state.tx.us/elections/laws/hb484-faq.shtml>

<sup>3</sup>Proof of release from the resulting disabilities of a felony conviction would include proof of judicial clemency under Texas Code of Criminal Procedure 42A.701, proof of executive pardon under Texas Code of Criminal Procedure 48.01, or proof of a restoration of rights under Texas Code of Criminal Procedure 48.05. (Texas Attorney General Opinion KP-0251)

**One of the following documents must be submitted with this application.**

Judicial Clemency under Texas Code of Criminal Procedure 42A.701


Executive Pardon under Texas Code of Criminal Procedure 48.01

Restoration of Rights under Texas Code of Criminal Procedure 48.05

<sup>4</sup>All oaths, affidavits, or affirmations made within this State may be administered and a certificate of the fact given by a judge, clerk, or commissioner of any court of record, a notary public, a justice of the peace, city secretary (for a city office), and the Secretary of State of Texas. See Chapter 602 of the Texas Government Code for the complete list of persons authorized to administer oaths.

# 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 <input checked="" type="radio"/> Sam FIRST  |              | MI R           |        | <b>OFFICE USE ONLY</b> |                        |                                   |                        |
|   | NICKNAME  |              | LAST Slaton    |        | Filer ID #             |                        |                                   |                        |
| 3 CANDIDATE MAILING ADDRESS                                 | ADDRESS / PO BOX; APT / SUITE #;  |              | CITY;          | STATE; | ZIP CODE               |                        |                                   |                        |
|   | 204 River Meadows Ln  |              | Argyle TX      |        | 76006                  |                        |                                   |                        |
| 4 CANDIDATE PHONE   | AREA CODE   | PHONE NUMBER | EXTENSION      |        |                        |                        |                                   |                        |
|   | (817)   | 403-1246     |                |        |                        |                        |                                   |                        |
| 5 OFFICE HELD (if any)                                      | Argyle ISD Board Trustee Place 3  |              |                |        |                        |                        | Date Received                     | 1-24-2023<br><i>gm</i> |
| 6 OFFICE SOUGHT (if known)                                  | Argyle ISD Board Trustee Place 3  |              |                |        |                        |                        | Date Hand-delivered or Postmarked | 1-24-2023              |
| 7 CAMPAIGN TREASURER NAME                                   | MS/MRS/MR <input checked="" type="radio"/> David FIRST  |              | MI R           |        | NICKNAME               |                        | LAST Slaton                       | SUFFIX                 |
|   |   |              |                |        |                        |                        |                                   |                        |
| 8 CAMPAIGN TREASURER STREET ADDRESS (residence or business) | STREET ADDRESS;   |              | APT / SUITE #; | CITY;  | STATE;                 | ZIP CODE               |                                   |                        |
|   | 5600 Wilton Terrace   |              |                | Justin | TX                     | 76047                  |                                   |                        |
| 9 CAMPAIGN TREASURER PHONE                                  | AREA CODE   | PHONE NUMBER | EXTENSION      |        |                        |                        |                                   |                        |
|   | (817)   | 403-1242     |                |        |                        |                        |                                   |                        |
| 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> |              |                |        |                        |                        |                                   |                        |
|   | <br>Signature of Candidate   |              |                |        |                        | 1/24/23<br>Date Signed |                                   |                        |

GO TO PAGE 2

**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

11 CANDIDATE  
NAME

Sam Slaton

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 \$940 in political contributions or make more than \$940 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.

2023

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>

# LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

# FORM CIS

(Instructions for completing and filing this form are provided on the next page.)

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This is the notice to the appropriate local governmental entity that the following local government officer has become aware of facts that require the officer to file this statement in accordance with Chapter 176, Local Government Code.

### OFFICE USE ONLY

Date Received

1-24-2023

gan

1 Name of Local Government Officer

Sam Slaton

2 Office Held

Board Trustee of Argyle ISD

3 Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code

N/A

4 Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.

N/A

5 List gifts accepted by the local government officer and any family member, if aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100 during the 12-month period described by Section 176.003(a)(2)(B).

Date Gift Accepted N/A Description of Gift N/A  
 Date Gift Accepted N/A Description of Gift N/A  
 Date Gift Accepted N/A Description of Gift N/A

(attach additional forms as necessary)

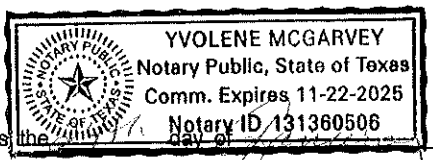
6 SIGNATURE I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to each family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a)(2)(B), Local Government Code.

*[Signature]*  
 Signature of Local Government Officer

### Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL



Sworn to and subscribed before me by SAM SLATON this 24th day of January

20 23, to certify which, witness my hand and seal of office.

*[Signature]* YVOLENE MCGARVEY  
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
 (street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 (month) (year)

Signature of Local Government Officer (Declarant)

## LOCAL GOVERNMENT OFFICER CONFLICTS DISCLOSURE STATEMENT

Section 176.003 of the Local Government Code requires certain local government officers to file this form. A "local government officer" is defined as a member of the governing body of a local governmental entity; a director, superintendent, administrator, president, or other person designated as the executive officer of a local governmental entity; or an agent of a local governmental entity who exercises discretion in the planning, recommending, selecting, or contracting of a vendor. This form is required to be filed with the records administrator of the local governmental entity not later than 5 p.m. on the seventh business day after the date on which the officer becomes aware of the facts that require the filing of this statement.

A local government officer commits an offense if the officer knowingly violates Section 176.003, Local Government Code. An offense under this section is a misdemeanor.

Refer to chapter 176 of the Local Government Code for detailed information regarding the requirement to file this form.

### INSTRUCTIONS FOR COMPLETING THIS FORM

*The following numbers correspond to the numbered boxes on the other side.*

- 1. Name of Local Government Officer.** Enter the name of the local government officer filing this statement.
- 2. Office Held.** Enter the name of the office held by the local government officer filing this statement.
- 3. Name of vendor described by Sections 176.001(7) and 176.003(a), Local Government Code.** Enter the name of the vendor described by Section 176.001(7), Local Government Code, if the vendor: a) has an employment or other business relationship with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code; b) has given to the local government officer or a family member of the officer one or more gifts as described by Section 176.003(a)(2)(B), Local Government Code; or c) has a family relationship with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 4. Description of the nature and extent of each employment or other business relationship and each family relationship with vendor named in item 3.** Describe the nature and extent of the employment or other business relationship the vendor has with the local government officer or a family member of the officer as described by Section 176.003(a)(2)(A), Local Government Code, and each family relationship the vendor has with the local government officer as defined by Section 176.001(2-a), Local Government Code.
- 5. List gifts accepted, if the aggregate value of the gifts accepted from vendor named in item 3 exceeds \$100.** List gifts accepted during the 12-month period (described by Section 176.003(a)(2)(B), Local Government Code) by the local government officer or family member of the officer from the vendor named in item 3 that in the aggregate exceed \$100 in value.
- 6. Signature.** Signature of local government officer. Complete this section after you finish the rest of this report. You have the option to either: (1) take the completed form to a notary public where you will sign above the first line that says "Signature of Local Government Officer" (an electronic signature is not acceptable) and your signature will be notarized, or (2) sign above both lines that say "Signature of Local Government Officer (Declarant)" (an electronic signature is not acceptable), and fill out the unsworn declaration section.

---

**Local Government Code § 176.001(2-a):** "Family relationship" means a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code.

---

**Local Government Code § 176.003(a)(2)(A):**

- (a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

\*\*\*

- (2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

# CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP  
COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

*Subscription to the Code of Fair Campaign Practices is voluntary.*

**OFFICE USE ONLY**

Date Received  
2-6-2023

gn

Date Hand-delivered or Postmarked

Date Processed

Date Imaged

**1 ACCOUNT NUMBER**  
(Ethics Commission Filers)

**2 TYPE OF FILER**

CANDIDATE

POLITICAL COMMITTEE

*If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.*

*If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.*

**3 NAME OF CANDIDATE**  
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)

FIRST

Sam

MI R

Slater

NICKNAME

LAST

SUFFIX (SR., JR., III, etc.)

**4 TELEPHONE NUMBER OF CANDIDATE**  
(PLEASE TYPE OR PRINT)

AREA CODE

PHONE NUMBER

EXTENSION

(817)

403-1246

**5 ADDRESS OF CANDIDATE**  
(PLEASE TYPE OR PRINT)

STREET/PO BOX:

APT/SUITE #:

CITY:

STATE:

ZIP CODE

224 Rivermeadows Ln Arisyl TX 76006

**6 OFFICE SOUGHT BY CANDIDATE**  
(PLEASE TYPE OR PRINT)

Argyle ISD Board Trustee Place 3

**7 NAME OF COMMITTEE**  
(PLEASE TYPE OR PRINT)

**8 NAME OF CAMPAIGN TREASURER**  
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)

FIRST

David

MI R

Slater

NICKNAME

LAST

SUFFIX (SR., JR., III, etc.)

**GO TO PAGE 2**

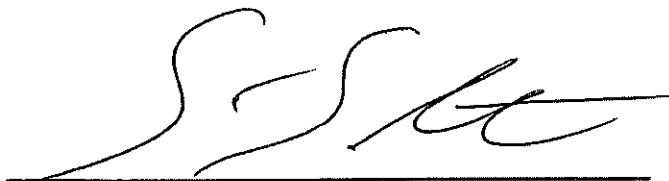
## CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

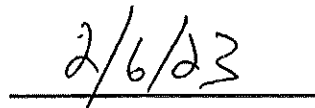
### THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.



Signature



Date