Prescribed by Secretary of State
Section 141.031, Chapters 143 and 144, Texas Election Code
09/2021

FEB 1 2 2025

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

LL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL Failure to provide required information may result in rejection of application								
APPLICATION FOR A PLACE ON THE City of Burnet GENERAL ELECTION BA					N 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 d	listinguis	hing num	ber, if any.) INDICATE 1	rerm .		
Mayor	Mayor Sepul UNEXPIRED					D		
FULL NAME (First, Middle, Last)				PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*				
Clifford Glenn Hirnel		dr.		CI	liff Hirneisen			
PERMANENT RESIDENCE ADDRESS (Do not inclu			Route. If	PUBLIC MAILING ADDRESS (Optional) (Address for which you receive				
you de not have a residence address, describe legation of residence.)				campaign related correspondence, if available.)				
	ATE	ZIP	000000	CITY			STATE	ZIP
Burnet	X	786	11					
PUBLIC EMAIL ADDRESS (Optional) (Address for	OCCUP		o not leav	ve blank) DATE OF BIRTH		Н	VOTER REGIS	TRATION VUID
which you receive campaign related emails, if available.)	The second second	05.00 1 (0 20 Mars 1 5 00)					NUMBER210	otional)
		red 1	Vurs	re				
TELEPHONE CONTACT INFORMATION (Option						// 2	11 614 1	2411
Home:		ice:	LEALOTTI	OF CONTIN	HOLIC DECIDENCE		4 818-2	
FELONY CONVICTION STATUS (You MUST chec				THE STATE (PRECINCT FROM
_			114	_				HT IS ELECTED
I have been finally convicted of a felony, b		been		21	year(s)			ear(s)
pardoned or otherwise released from the disabilities of that felony conviction and I	(1) Table	ided	/					
proof of this fact with the submission of the	The state of the s	CONTRACTOR AND				month(s)		
*If using a nickname as part of your name to ap								
my nickname does not constitute a slogan or o								
been commonly known by this nickname for at Election Code regarding the rules for how name					riease review se	ctions 52.031	., 52.032 and 57	2.033 of the Texas
					LANCATE	Chima	ici	who
Before me, the undersigned authority, on this obeing by me here and now duly sworn, upon or		nally appe	eared (nar	ne or candio	date) (114	HIVA	13/10	, who
"I, (name of candidate)				of P	menta		Count	ty, Texas,
being a candidate for the office of				_		will support :		Constitution and
laws of the United States and of the State of To	exas. I am	a citizen						
this state. I have not been determined by a fir	nal judgme	ent of a co	ourt exerc	ising proba	te jurisdiction to	be totally m	entally incapad	citated or partially
mentally incapacitated without the right to vot								
any prior felony conviction, and if so convicted, any such final felony conviction. I am aware the								
status constitutes a Class B misdemeanor. I fur								
			X	LAM	MK		29_	
SIGNATURE OF CANDIDATE								
Sworn to and subscribed before me this the	3_ day o	of FRB	xn a	1 2	, by		Phosen	
(0	day)		(month)	1	(year)	(n	ame of candida	ate)
1 9		_		_1	Morein Go	2.4		
Signature of Officer Authorized to Administer Oath ⁴ Printed Name of Officer Authorized to Administer Oath								
Title of Offices Authorized to Administrative Onth								
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:								
CASH CHECK MONEY ORDER CASHIERS CHECK OR PETITION IN LIEU OF A FILING FEE.								
This document and \$ filing fee or a nominating petition of pages received. Uoter Registration Status Verified								
//								
Date Accepted Date Accepted Signature of Filing Officer or Designee								

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
PEB 1 2 2025
Date Hand-delivered or Postmarked
Date Processed
Date Imaged

1 ACCOUNT NUMBER (Ethics Commission Filers)	2 TYPE OF FILER CANDIDATE If filing as a candidate, con then read and sign page 2.	nplete boxes 3 - 6, If filli	ITICAL COMMITTEE ing for a political committee, complete is 7 and 8, then read and sign page 2.
3 NAME OF CANDIDATE (PLEASE TYPE OR PRINT)	Mr Cli	Prord	G G
	Cliff	Hirneisen	SUFFIX (SR., JR., III, etc.)
4 TELEPHONE NUMBER OF CANDIDATE (PLEASE TYPE OR PRINT)	AREA CODE (484)	PHONE NUMBER 318 - 2211	EXTENSION
5 ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT)	STREET/PO BOX; APT/SU	N. 1797/01371	STATE; ZIP CODE
6 OFFICE SOUGHT BY CANDIDATE (PLEASE TYPE OR PRINT)	May	or	
7 NAME OF COMMITTEE (PLEASE TYPE OR PRINT)	D)	16	
8 NAME OF CAMPAIGN TREASURER (PLEASE TYPE OR PRINT)	Mr C/j	first Last Hirnelsen	SUFFIX (SR., JR., III, etc.)

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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 untrammeled 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

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	MS/MRS (MR) FIRST MI	OFFICE USE ONLY			
	NAME	Clifford G.	Filer ID #			
		NICKNAME LAST SUFFIX	Date Received F F F DO			
			Date Received 5 5 1 1 1 1 1 1 1			
_	CANDIDATE	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE	FER 1 9 per			
3	CANDIDATE MAILING		FEB 1 2 2025			
	ADDRESS	Burnet TX 78611	BX (V			
			Date Hand-delivered or Postmarked			
4	CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt# Amount\$			
	THONE	(484) 818 ~ 2211	Date Processed			
	organillation - Profragation and	(101) 818 ~ 2211	5210 11000000			
5	OFFICE HELD		Date Imaged			
_	(if any)					
6	OFFICE SOUGHT (if known)	Mayor				
7	CAMPAIGN TREASURER	MS/MRS/MB FIRST MI NICKNAME	LAST SUFFIX			
	NAME	clifford G Cliff Win				
		clifford G Cliff Him	reisen Ir.			
8	CAMPAIGN	STREET ADDRESS: APT LSUITE #, CITY;	STATE; ZIP CODE			
	TREASURER STREET	Burnet	TX 79/11			
,	ADDRESS	1200000	100 10001			
()	residence or business)	-				
9	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION				
	TREASURER PHONE	(484) 818 - 2211				
		(484) 818 - 2211				
10	CANDIDATE					
	SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	xas Government Code.			
		Lam aware of my responsibility to file timely reports as	required by title 15 of			
	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.				
		- all of her	2/13/2025			
		Signature of Candidate	Date Signed			
	GO TO PAGE 2					

11 CANDIDATE NAME 12 MODIFIED **COMPLETE THIS SECTION ONLY IF YOU ARE** REPORTING DECLARATION **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 \$1,080 in political contributions or make more than \$1,080 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. Year of election(s) or election cycle to which declaration applies

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
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