* * * * BASTROP VOTES	Candidate Questionnaire An Initiative of the Bastrop Chamber of Commerce
Name (last, first, middle)	Preferred name
Which office are you seeking?	# of years in the community
Address	City State Zip
Campaign Website	Campaign Facebook
Cell phone Cam	paign phone Campaign Email
Preferred means of communication:	Email Phone Mail Text
Please highlight your experiences and a elected capacity:	accomplishments that you feel have equipped you to serve in an
ist your involvement with community org	anizations over the last 24 months:

BastropVotes.com Candidate Questionnaire, pg. 2

Please rank what you feel are the top 3 campaign issues, explaining your position and why

1.	
2.	
0.	

Additional comments:

What are your suggestions to increase voter turnout?

Electronic Signature

Date

Send to: Bastrop Chamber of Commerce 927 Main Street Bastrop, TX 78602 phone: (512) 303-0558 / email: info@bastropchamber.com

An Initiative of

