

Candidate Questionnaire

An Initiative of the Bastrop Chamber of Commerce

Name (last, first, middle)	Preferred name			
Which office are you seeking?	# of y	# of years in the community		
Address	City	State	Zip	
Campaign Website	Camp	paign Facebook		
Cell phone Campaign phone	2	Campaign Email		
Preferred means of communication: Email	Phone Mail	Text		
Why, in your opinion, are you qualified for this office?)			
Please highlight your experiences and accomplishrelected capacity:	ments that you feel	have equipped yo	u to serve in ar	
Explain your involvement with community organizatio	ons over the last 24 m	nonths:		

BastropVo	tes.com Candidate Questionnaire, pg. 2
Please rank	what you feel are the top 3 campaign issues, explaining your position and why
1.	
2.	
3.	
J.	
Additional c	omments:
What are yo	our suggestions to increase voter turnout in the City of Bastrop??
	onie B Schocke
Electron	Signature
	Candidate Questionnaire Deadline is March 16th, 2017!
Send to:	Bastrop Chamber of Commerce 927 Main Street Bastrop, TX 78602 phone: (512) 303-0558 / email: info@bastropchamber.com

An Initiative of

