

Candidate Questionnaire

An Initiative of the Bastrop Chamber of Commerce

Name (last, first, middle)	Prefe	# of years in the community		
Which office are you seeking?	# of y			
Address	City	State	Zip	
Campaign Website	Camp	Campaign 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.		
Additional of	comments:	_
What are ye	our suggestions to increase voter turnout in the City of Bastrop??	
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
		An Initiative of

