



DELBERT HOSEMANN  
Secretary of State

Qualifying Statement of Intent  
INDEPENDENT CANDIDATE – SPECIAL ELECTION

I, Tammie Hawkins Phillips  
(Please print name, as it will appear on the ballot)

a qualified elector of the County of Madison

State of Mississippi; do hereby declare my candidacy for the office of

Election Commissioner, 2 District (if applicable), at  
(Complete name of office sought)

the Special Election to be held on November 3, 2015  
(Date of Special Election)

Name: Phillips Tammie Terrell Date of Birth: \_\_\_\_\_  
Last First Middle Month Day Year

Mailing Address: \_\_\_\_\_  
City, State, Zip Code

Street Address: \_\_\_\_\_  
City, State, Zip Code

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

I hereby certify that: (mark as applicable):

- I have never been convicted of bribery, perjury or other infamous crime, being defined as a crime punishable by confinement in the penitentiary.
- I have never been convicted of a felony in federal court after December 8, 1992, nor of a crime in the court of another state which is a felony in this state, after December 8, 1992, as provided in Section 44 of the Mississippi Constitution.
- I meet all constitutional, statutory and other legal requirements to hold said office.

Signature of Candidate Tammie Phillips Date 7/27/15

Received by: Ronny Lott Chancery Clerk Date 7/30/15  
Signature by: Charles D.C. Title

**FILED**  
MADISON COUNTY  
JUL 30 2015  
RONNY LOTT, CHANCERY CLERK  
BY Charles D.C. D.C.

INTERNAL OFFICE USE:  
STMT. OF INT. W. SIG  
**FILED**  
TUE DAY  
JUL 27 2015  
LEE WESIBROOK  
CIRCUIT CLERK



FILED  
MADISON COUNTY

AUG 11 2015

DELBERT HOSEMANN  
Secretary of State

RONNY LOTT, CHANCERY CLERK

BY [Signature]

Qualifying Statement of Intent  
INDEPENDENT CANDIDATE - SPECIAL ELECTION

I, Shelia Willis  
(Please print name, as it will appear on the ballot)

a qualified elector of the County of Madison

State of Mississippi; do hereby declare my candidacy for the office of

Election Commissioner, #2 District (if applicable), at  
(Complete name of office sought)

the Special Election to be held on November 3, 2015  
(Date of Special Election)

Name: Willis Shelia Bland Date of Birth: \_\_\_\_\_  
Last First Middle Month Day Year

Mailing Address: \_\_\_\_\_  
City, State, Zip Code

Street Address: \_\_\_\_\_  
City, State, Zip Code

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

I hereby certify that: (mark as applicable):

- I have never been convicted of bribery, perjury or other infamous crime, being defined as a crime punishable by confinement in the penitentiary.
- I have never been convicted of a felony in federal court after December 8, 1992, nor of a crime in the court of another state which is a felony in this state, after December 8, 1992, as provided in Section 44 of the Mississippi Constitution.
- I meet all constitutional, statutory and other legal requirements to hold said office.

Signature of Candidate Shelia B. Willis 08/06/15  
Date

Received by: Ronny Lott Chancery Clerk 8/11/15  
Signature Title Date

INTERNAL OFFICE USE:  
STMNT OF INT W SIG \_\_\_\_\_  
PETITION W CERT \_\_\_\_\_  
  
DATE STAMP



FILED  
MADISON COUNTY

AUG 11 2015

RONNY LOTT, CHANCERY CLERK

BY Parker D.C.

DELBERT HOSEMANN  
Secretary of State

Qualifying Statement of Intent  
INDEPENDENT CANDIDATE – SPECIAL ELECTION

I, Pallascene Bright Cole  
*(Please print name, as it will appear on the ballot)*

a qualified elector of the County of Madison County,

State of Mississippi; do hereby declare my candidacy for the office of

ELECTION COMMISSIONER, DISTRICT 5, \_\_\_\_\_ District (if applicable), at  
*(Complete name of office sought)*

the Special Election to be held on November 3, 2015.  
*(Date of Special Election)*

Name: Cole                      Pallascene                      Bright                      Date of Birth:                      /  
*Last                                      First                                      Middle                                      Month                      Day                      Year*

Mailing Address: \_\_\_\_\_  
*City, State, Zip Code*

Street Address: \_\_\_\_\_  
*City, State, Zip Code*

Phone Number: (                      )                      Email Address: \_\_\_\_\_

I hereby certify that: (mark as applicable):

- I have never been convicted of bribery, perjury or other infamous crime, being defined as a crime punishable by confinement in the penitentiary.
- I have never been convicted of a felony in federal court after December 8, 1992, nor of a crime in the court of another state which is a felony in this state, after December 8, 1992, as provided in Section 44 of the Mississippi Constitution.
- I meet all constitutional, statutory and other legal requirements to hold said office.

Signature of Candidate Pallascene B. Cole August 6<sup>th</sup>, 2015

Received by: Ronny Lott, Chancery Clerk 8/11/15  
*Signature                                      Title                                      Date*

INTERNAL OFFICE USE:  
STMT OF INT W SIG \_\_\_\_\_  
PETITION W CERT \_\_\_\_\_  
  
DATE STAMP