Prescribed by Secretary of State Section 141.031, Chapters 143 and 144, Texas Election Code 09/2023

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 PROVIDE	D UNI	ESS INDI	CATED A	SOPTIONA	L ¹ Fallure to							
APPLICATION FOR A PLACE ON THE NOR PORTED OF BUMING OUGENERAL ELECTION BALLOT												
TO: City Secretary/Secretary of Board (name of election)												
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 distinguishing number, if any.) NAVOR FULL UNEXPIRED									:D			
FULL NAME (First, Middle, Last)						PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*						
BERNADETTE W	<u>-</u>	BERNADETTE WACKER										
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.)												
1734 OLD BLOOM	INC	NOTE		D	campaign related correspondence, if available.)							
CITY	STATE ZIP				CITY			STATE	ZIP			
BUDOMINGTON	TX 77951		12	I	MINET	MINEITON		77951				
PUBLIC EMAIL ADDRESS (Optional) (Address		OCCUPATION (Do not leave blank) DATE OF BIRTH				RTH		STRATION VUID				
which you receive campaign related emails, if available	:.)	Nu	Xot	;				NUMBER ² (Optional)				
TELEPHONE CONTACT INFORMATION (Op	tiona	1 -0				1						
Home: NIA	ciona	•		WA			6-31.	101,9,27	.3506			
HORRE.	check	Off	ice:		OF CONTIN	HOUS RESIDEN						
FELONY CONVICTION STATUS (You MUST check one) LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN IN THE STATE OF TEXAS IN TERRITORY/DISTRICT/PRECINCT FROM												
	WHICH THE DESIGN SOLICHT IS ELECTED											
Thave been infairy convicted of a felony, but I have been								i				
disabilities of that felony conviction and I have provided								à	3			
proof of this fact with the submission		0	month(s)		month(s)							
*If using a nickname as part of your name												
my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have												
been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas												
Election Code regarding the rules for how names may be listed on the official ballot.												
Before me, the undersigned authority, on this day personally appeared (name of candidate) REPNAIXTE WACKER, who												
being by me here and now duly sworn, upon oath says: "I, (name of candidate) DETWARETE WALKER, of VICTORIA County, Texas,												
being a candidate for the office of	TAV	DR.	<i></i>									
being a candidate for the office of												
this state. I have not been determined by												
mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose												
any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of												
any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."												
Status constitutes a class of inispenication. Fluither swear that the foregoing statements included in my application are in an unings true and correct,												
(X Druadette Weller												
SIGNATURE OF CANDIDATE												
Sworn to and subscribed before me this th	8		of W	MAM		102万 by	Bernad	etac Wall	Cer .			
(day) (month) (year) (name of candidate)												
JANIOUULA ILLUES HWANDA YOLLES												
Signature of Officer Authorized to Adminis	ter O	ath ⁴			Prin	ted Name of C		ed to Administ	er Oath			
Wotany Dublic					- T/	Tokal N	AMANDA RI Juny Public, Sta	te of Texas				
Title of Officer Authorized to Administer O					41.		My Commission					
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEET Applicable) PAID BY:												
CASH CHECK MONEY ORDER CASHIERS CHECK OR PETITION IN THE CONTRACT PROPERTY OF THE PETITION IN THE												
This document and \$ filing fe	e or a	nomina	ting pet	ition of	page	s received.	Voter_	Registration S	tatus Verified			
12,4,2005 2,		15	(Si	ee Section	1.0071	ger	750	11 fells				
Date Received Date Accep	ted .	A. a	_ 15.			Signature of F	ling Officer or	Designee				

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

INFORMATION IS REQUIRED TO BE PROVIDED APPLICATION FOR A PLACE O	NTHE BIO	CATED AS OPTION/ Domington In	AL ¹ Fallure to ICOPDOFA	provide require tion			rejection of application of Application	
TO: City Secretary/Secretary of Board	14 111F	Iname of	election)		OF!AF!	3/**C EFFO11	ON BALLOT	
I request that my name be placed on the	above-name		-	e for the office	indicated be	elow.		
OFFICE SOUGHT (Include any place numb	er or other d	istinguishing nun	nber, if any		TERM			
Commissioner 1				FULL		UNEXPIR	ED	
FULL NAME (First, Middle, Last)		PRINT NA	ME AS YOU WA	NT IT TO AP	PEAR ON THE	BALLOT*		
Sarah Naomi Stindt		Sarah	Stindt					
PERMANENT RESIDENCE ADDRESS (Do not in you do not have a residence address, describe lon 167 N Herbert	PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.) Po box 179							
CITY	STATE	ZIP	CITY			STATE	ZIP	
Bloomington	TX	77951	Bloom	ington		TX	77951	
PUBLIC EMAIL ADDRESS (Optional) (Address which you receive campaign related emails, if available.)	•	Do not leave blank) DATE OF BIRTH			VOTER REGISTRATION VUID NUMBER ² (Optional)		
		unting assis	tant	,	,			
TELEPHONE CONTACT INFORMATION (Opt	•	_						
Home: (361) 897-9242 FELONY CONVICTION STATUS (YOU MUST O		ice:	I OE CONTIN	HIGHE DECIDENC	Cell:	THIC APPLICA	TION WAS SWORN	
i have not been finally convicted of a f			THE STATE					
I have been finally convicted of a felor	•					ORY/DISTRICT/PRECINCT FROM HE OFFICE SQUGHT IS ELECTED		
pardoned or otherwise released from	peen	<u>29</u>	year(s)		THE OFFICE SOUGHT IS ELECTED 29 year(s)			
disabilities of that felony conviction an	d I have prov	1	7	month(s)	7			
proof of this fact with the submission of *If using a nickname as part of your name to						_/ month(s)		
Election Code regarding the rules for how n Before me, the undersigned authority, on the Being by me here and now duly sworn, upo	nis day persor		me of candi		Stindt		, who	
(I, (name of candidate) Sarah Stindt			_, _{of _} Vic	toria		County, Texas,		
being a candidate for the office of <u>Con</u> laws of the United States and of the State of this state. I have not been determined by a mentally incapacitated without the right to any prior felony conviction, and if so convicany such final felony conviction. I am awar status constitutes a Class B misdemeanor.	of Texas. I am a final judgme vote. I am av ted, must pro e that knowir	a citizen of the Unit of a court exert ware of the nepotivide proof that I had by providing fals	nited States cising proba sm law, Cha ave been pa e informatia	eligible to hold ate jurisdiction to apter 573, Gover ardoned or other on on the applic	such office un o be totally mannent Code. Twise released ation regardi	nder the consinentally incapa I am aware I from the resing my possible	acitated or partiall that I must disclose ulting disabilities o e felony conviction	
		\mathbf{X}_{t}	Slow	d St	tto			
		Į	SIGNATU	RE OF CANDIDA	ATE		-	
Sworn to and subscribed before me this the	14th day a	of Februa			Sarah S	Stindt		
A	(day)	(month)		(year)		name of candid	date)	
Manga lufes	·····•	Amanda Reyes						
Signature of Officer Authorized to Administ	er Oath⁴		Pri	nted Name of Of	ficer Authoria	zed to Adminis	ster Oath	
MHOMY VUNIC			1000		· in the second			
litle of Officer Authorized to Administer Oa			ALCO LAND	No. Aletona D	MANDA REYES Public, State of	Taunn L	·	
TO BE COMPLETED BY FILING OFFICER: 1 CASH CHECK MONEY ORDER CHECK MONEY ORDER	CASHIERS	CHECK OR 🗆 PE	TITION	THE REQUIRED	DIE 23. 2028	L App cable) PAID BY: Status Verified	
This document and \$filing fee	or a nomina	ting petition of (See Section		E FOCOWOO.	130	May be the second	Status Verified	
Date Received Date Accept	ed	_ · ·	-	Signature of Fili	ing Officer or	r Designee		

09/2023

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LL INFORMATION IS REQUIRED TO BE PROVIDE	D UN	LESS INDIC	CATED A	S OPTIONA	AL ¹ Fallure to	prov	ride requirec	l information	may result in	rejection of application			
APPLICATION FOR A PLACE O	N 1	HE I		De Afra	01-4	Ste	eyh Tr	GENER	AL ELECT	ION BALLOT			
TO: City Secretary/Secretary of Board		7		(name of	election)		7						
I request that my name be placed on the							the office	indicated be	low.				
OFFICE SOUGHT (Include any place num	nber, if any.)	INDICATE T	TERM .									
Commissioner 2							FULL		UNEXPI	RED			
FULL NAME (First, Middle, Last)						PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*							
						u.L.	1.						
PERMANENT RESIDENCE ADDRESS (Do not	CELE	5/0	longo	7 ° E	· · · · · · · · · · · · · · · · · · ·	hich you receive							
you do not have a residence address, describe to				ai Route. If				S (Optional) ence, if availat		nich you receive			
263 SAN ANTONOSE						P.O. Box 773							
CITY	STATE ZIP			CITY	- <u>/</u>	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	STATE	ZIP					
	\$000		the cong						angey-	77857			
Bloomytoni		C.J.		951					100				
PUBLIC EMAIL ADDRESS (Optional) (Address which you receive campaign related emails, if available		OCCUPA	ATION (Do not lea	ve blank)	GISTRATION VUID (Optional)							
Times you receive compagn related chains, it available	···,	Truck	Da	i veu]			WOMBER	(Optional)			
TELEPHONE CONTACT INFORMATION (Op	tiona			·		-		****					
Home: Mene		Offi	ice: 🚜	1000				Cell (34	1) 676	-0746			
FELONY CONVICTION STATUS (You MUST	chec				OF CONTIN	υου	S RESIDENCI			ATION WAS SWORN			
Thave not been finally convicted of a	Thave not been finally convicted of a felony. IN THE STATE OF TEXAS IN TERRITORY/DISTRICT/PRECINCT FROM												
have been finally convicted of a felo		52 year(s) WHICH				THE OFFICE SOUGHT IS ELECTED							
	pardoned or otherwise released from the resulting						(S)		✓/_year(s)				
disabilities of that felony conviction a		•			month(s)				month(s)				
proof of this fact with the submission of this application. ³ *If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that													
my nickname does not constitute a slogan													
been commonly known by this nickname for													
Election Code regarding the rules for how	namo	es may be	listed o	n the offic	lal ballot.								
Before me, the undersigned authority, on t	this c	lay person	ally app	eared (na	me of candi	iate	Chang?	to Kingo	119	, who			
being by me here and now duly sworn, upo	on oa	ith says:							,,				
"I, (name of candidate)	"I, (name of candidate) County, Texas,								ınty, Texas,				
being a candidate for the office of	being a candidate for the office of												
laws of the United States and of the State										i de la companya de			
this state. I have not been determined by mentally incapacitated without the right to													
any prior felony conviction, and if so convic													
any such final felony conviction. I am awa													
status constitutes a Class B misdemeanor.	I fur	ther swear	that th	ne foregoin	g statement	s inc	luded in my	application a	ire in all thin	gs true and correct."			
				X	63	wife.							
					<u>Comments</u>	- (C.)	X						
SIGNATURE OF CANDIDATE										N.O			
Sworn to and subscribed before me this th	e 📗	day c	of 📈	MMMI	<u>47</u>	W.	᠘ by <u>:</u>	MM	5 MANO.	/I'/			
1.0	(d	ay)	*	(month)	J 1	(ye	ear)	(n	ame of cand	idate)			
- ANNOMAR VIIMA					\mathcal{O}	۸N	(Mda	NRW C					
Signature of Officer Authorized to Adminis	ter C	ath ⁴			Poli	ico.	Name or Or	MANBAHEV	ed to Admin	ister Oath			
IN EQUILAR VILLES						7.00		Public, State					
White My Commission Expires													
Title of Officer Authorized to Administer O							Z.	June 23, 2026		. A BAIR DV			
TO BE COMPLETED BY FILING OFFICER:									កេម្មសាក្រមុខ	e) PAID BY:			
CASH CHECK MONEY ORDER								B	Damiat 41	Chatus Mauldiaul			
This document and \$filing fee	e or	a nomina	ting pe	tition of _	page	s rec	eived.	voter	kegistration	Status Verified			
12/14/25 2/19	A	115	15	ee Section	1.0071		State of the State	740	11 feller				
Date Received Date Accept	ted	9-4	_ ,5			Signa	ature of Fili	ng Officer or	Designee				