## 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 PROVIDED U			AL¹ Failure to	provide r	equired	information	may result in re	ejection of application	
APPLICATION FOR A PLACE ON	THE <u> </u>	4t~ 7	250			GENER	AL ELECTIC	N BALLOT	
TO: City Secretary/Secretary of Board		(name of	election)						
I request that my name be placed on the ab					office i	ndicated be	low.		
OFFICE SOUGHT (Include any place number	or other distin	iguishing nun	nber, if any	.) INDI	ICATE T	ERM	<del></del>		
District & City Clouncy				FULL UNEXPIRED					
FULL NAME (First, Middle, Last)				PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*					
<del></del>			~						
Juan mendozi			70	an h	ren	00m			
PERMANENT RESIDENCE ADDRESS (Do not incluyou do not have a residence address, describe locati						i (Optional) ( ence, if availab	Address for which	th you receive	
you do not have a residence address, describe locati	on or residence.)		railipaigii i	elateu cori	esponue	nice, ii avallab	ie.)		
CITY STATE ZIP			CITY				STATE	ZIP	
		786641		A 1.5			-4 /	700	
Lochhart	72	2 Court	ل ك	china	X VV		TOL	10614	
PUBLIC EMAIL ADDRESS (Optional) (Address for	OCCUPATIO	N (Do not lea	o not leave blank) DATE OF BIRTH					TRATION VUID	
which you receive campaign related emails, if available.)	1 min	ink	0 70.10			اممدا	NUMBER <sup>2</sup> (Optional)		
TELEPHONE CONTACT INFORMATION (Option	<u>  Dri</u>	001		<u> </u>	20/	1981			
Home: 5\7\$52-7529 Office: Cell:  FELONY CONVICTION STATUS (You MUST check one) LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS S								ON MAC CHAODA	
FELONY CONVICTION STATUS (You MUST cher I have not been finally convicted of a felony.	ck one)				IDENCE				
							TORY/DISTRICT/PRECINCT FROM HE OFFICE SOUGHT IS ELECTED		
I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting			4Zyear(s)				year(s)		
disabilities of that felony conviction and I have provided			<u> </u>			<u></u>			
proof of this fact with the submission of this application. <sup>3</sup>			month(s)			month(s)			
This Box Must ONLY be Completed by Candid	ates for School	District Board	of Trustee	5					
Check the Box Below:									
I am aware that I am not eligible to serve as a t	rustee of an inde	ependent scho	ol district if I	am require	ed to reg	ister as a sex	offender under	Chapter 62, Code	
of Criminal Procedure. *If using a nickname as part of your name to appeal	u on the bellet o				- f-11				
nickname does not constitute a slogan or contain a									
known by this nickname for at least three years pric									
rules for how names may be listed on the official ba									
Before me, the undersigned authority, on this day p	ersonally appea	red (name of c	andidate)	June	<u>~~</u>	and ar	who	being by me here	
and now duly sworn, upon oath says:	vd	of	1 10661	ا سائده .	Cul	ے ای صدیا ک	ounty Toyos B	toine a candidate for	
"I, (name of candidate)									
State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final									
judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially 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									
SIGNATURE OF CANDIDATE									
Sworn to and subscribed before me this the	l day of #	Waust		WATURE			WE NOW	LA	
	day)	(month)		(year)	/ ~ / _L		me of candida		
- 1: 10 1	·· • • •	فمحتد	T W ADENK			•			
Julie Mudanka Baramon Julie MLADENKA BUNERMUN									
Signature of Officer Authorized to Administer Oath									
NOTIFIED PUBLIC, STATEDE TOKAS		Ø /\$/ My Cor	nmission Ex orii 26, 2027	פשוום					
Title of Officer Authorized to Administer Oath		i'' Ar	211 20, 202.	MOTALIS	ai or Uti	ficial Seal			
	S APPLICATION	I IS ACCOMP	ANIED RY 1	HE REOU	JIRED F	ILING FEF (1	f Applicable)	PAID BY:	
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:  CASH CHECK MONEY ORDER CASHIERS CHECK OR PETITION IN LIEU OF A FILING FEE.									
This document and \$ filing fee or a nominating petition of pages received.    Voter Registration Status Verified									
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8/11/25 8/13	125	(See Section	1.007)	40.0	<u> 4</u> 1	mer nan	I. ~	_	
Date Received Date Accepted				gnature	of Filin	g Officer or	Designee		