Section 141.031, Chapters 143 and 144, Texas Election Code 09/2021

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

A DOLLAR THE PROVIDED UNLESS INDICATED	D AS OPTIONA	NL1 Failure to	provide require	d information	may result in r	ejection of applicati	
APPLICATION FOR A PLACE ON THECit	ty of Sandy	Oaks, Te	exas			ON BALLOT	
TO: City Secretary/Secretary of Board	(name of	election)					
I request that my name be placed on the above-named offi	cial ballot as	a candidat	e for the office	indicated be	elow.		
OFFICE SOUGHT (Include any place number or other disting	guishing num	ber, if any.) INDICATE				
Alderman Place 5			XFULL		UNEXPIRE	ED.	
FULL NAME (First, Middle, Last)		PRINT NA	ME AS YOU WA	NT IT TO APP			
Debra Ann MARtiNEZ		Del	DRA M	1. 1.	eZ	7.227	
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or R	lural Route. If	PUBLIC M	AILING ADDRES			ch you receive	
you do not have a residence address, describe location of residence.) 22910 Shaw Fokest Dr.	campaign related correspondence, if available.)						
CITY STATE ZIP		CITY			STATE	ZIP	
Closendorf TX 7	8112						
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)	(Do not leav	Do not leave blank) DATE OF BIRTH				VOTER REGISTRATION VUID	
dmartinez Ocifiof Sandingles. com Nous	2 wife	ite 05/11/1964			NUMBER ² (Optional) 21a 309 2332		
TELEPHONE CONTACT INFORMATION (Optional)			- 111	11141	_	スノンベ	
Home: Office:				Call. 11	760 n-10000 -	3280	
Home: Office: Cell: 210 - 3280 FELONY CONVICTION STATUS (You MUST check one) LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN							
I have not been finally convicted of a felony. IN THE STATE OF TEXAS IN TERRITORY/DISTRICT/PRECINCT							
I have been finally convicted of a felony, but I have been					OFFICE SQUG		
pardoned or otherwise released from the resulting					28 year(s)		
disabilities of that felony conviction and I have provided							
proof of this fact with the submission of this application. ³					month(s)		
*If using a nickname as part of your name to appear on the ball	ot, you are al	so signing a	nd swearing to t	the following	statements: 11	further swear that	
my nickname does not constitute a slogan or contain a title, n been commonly known by this nickname for at least three year	or does it inc	licate a poli	tical, economic,	social, or rel	igious view or	affiliation. I have	
Election Code regarding the rules for how names may be listed	on the officia	al ballot.	lease review se	ctions 52.031	, 52.032 and 52	2.033 of the Texas	
Before me, the undersigned authority, on this day personally apbeing by me here and now duly sworn, upon oath says:			ate) Debra	Ang M	artiner	, who	
"I, (name of candidate) Debra Am Marinez		of R	wal		C	T.	
A / /	ace 5	, 01	Supar that I	:!!		y, Texas,	
laws of the United States and of the State of Texas. I am a citiz	en of the Un	ited States	ر swear that i ۱ Pligible to hold s	will support a	nd detend the	Constitution and	
this state. I have not been determined by a final judgment of a	a court exerc	ising probat	e jurisdiction to	be totally m	entally incapac	itated or partially	
mentally incapacitated without the right to vote. I am aware o	of the nepotis	m law, Char	ter 573. Govern	nment Code.	I am aware th	at I must disclose	
any prior felony conviction, and if so convicted, must provide pi	roof that I ha	ve been par	doned or other	wise released	from the resul	ting disabilities of	
any such final felony conviction. I am aware that knowingly pr status constitutes a Class B misdemeanor. I further swear that t	oviding false	statement	on the application of the control of	ition regardin	ng my possible	felony conviction	
l l l l l l l l l l l l l l l l l l l	-		included in my	application a	ie in all things	urue and correct."	
X Nebra C. Warnie							
		-	OF CANDIDA	TE '			
Sworn to and subscribed before me this the day of (day)	(neonth)	<u>t</u> _ ć	2023_, by_ (year)	bebro	Morti ame of candida	nez.	
Kather Ultime	,	Y	Alle	MARI	plton		
Signature of Officer Authorized to Administer Oath ⁴		Print	ed Name of Off	icer Authoriz	ed to Administe	er Oath	
Title of Officer Authorized to Administer Oath			Notarial or O				
	IS ACCOMADA	AUCD DV T	HE DECLUSES				
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION CASH CHECK MONEY ORDER CASHIERS CHECK	OR DET	MINIED BY I	TE KEQUIKED	FILING FEE (I	T Applicable) i	PAID BY:	
This document and \$ filing fee or a nominating pe							
	ention of	pages	received.	□ Voter R	Registration St	atus Verified	
	See Section		Kat	hyl	fel	low	
Date Received Date Accepted		S	gnature of Filir	ng Officer or		The state of the s	
				O L	Print	Reset	