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

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS	OPTIONAL¹ Failure to provide requi	red information	may result in re	ejection of applicati				
APPLICATION FOR A PLACE ON THE USO BOOKED OF TVOTOS SEAL OF GENERAL ELECTION BALLOT								
TO: City Secretary/Secretary of Board	(name of election)	vuse						
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 distinguis	hing number, if any.) INDICAT	E TERM						
I SCOVED OF TYUSICES SOUT A	TLAYOR DIFULI		UNEXPIRE	D				
FULL NAME (First, Middle, Last)	PRINT NAME AS YOU W	ANT IT TO APP	EAR ON THE B	ALLOT*				
Brianne Lina Marrian	an Burne	1 MAI	/1/11/100	(1)				
DI MILLO OMINI I MILLIONI	AVI DITOTIVIC	C. (101)	VOIVI	avi				
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural you do not have a residence address, describe location of residence.)	Route. If PUBLIC MAILING ADDRI campaign related correspondence			n you receive				
	Surpus Sursus Concessor							
CITY STATE ZIP	CITY		STATE	ZIP				
Victoria IN 1779	704							
O I O I O I I O I	<u> 12 Particular de la comencia de particular de la comencia del comencia de la comencia del comencia de la comencia del la comencia de la comencia del la comencia de la co</u>							
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)	o not leave blank) DATE OF BIF	ктн	NUMBER ² (Op	TRATION VUID				
1		2	WOWNER (OF	, cional,				
TELEPHONE CONTACT INFORMATION (Optional)	7.0							
Home: Office:		Cell:		•				
FELONY CONVICTION STATUS (You MUST check one)	LENGTH OF CONTINUOUS RESIDEN		THIS APPLICATION	ON WAS SWORN				
☐ I have not been finally convicted of a felony.	IN THE STATE OF TEXAS			RECINCT FROM				
I have been finally convicted of a felony, but I have been	75	WHICH THE	7 1	HT IS ELECTED				
pardoned or otherwise released from the resulting	- / Marici							
disabilities of that felony conviction and I have provided	month(s)	month(s)		month(s)				
proof of this fact with the submission of this application. ³	you are also signing and swearing to	the following s	Walley District					
*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 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 pr	아이 그게 되는 내 가게 되어 되는 이번 경에 그렇게 되었다. 그런 그런 그런 그런 그런 그 없어 때문에 그 없었다.		To Manifest the State of the St					
Election Code regarding the rules for how names may be listed on	the official ballot.							
Before me, the undersigned authority, on this day personally appe	ared (name of candidate) Bricen	ne Harri	man	who				
being by me here and now duly sworn, upon oath says:								
"I, (name of candidate) BY ANNE HAVY MAN	of Victoria		County	, Texas,				
being a candidate for the office of BOAYA & TVISTO WISD swear that I will support and defend the Constitution and								
laws of the United States and of the State of Texas. I am a citizen								
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 m	y application ar	e in all things t	rue and correct."				
xthana Mana								
1 that I will will								
(1 V)-	SIGNATURE OF CANDID	•						
Sworn to and subscribed before me this the day of	igust 1022 by	Brian		mymas.				
(day)	(mgnth) (year)	(na	me of candidat	te) O				
Huru levant	all all be	my ren	ningti	20				
Signature of Officer Authorized to Administer Oath ⁴	APPRESSION OF THE STATE OF THE	fficer Authorize	Second Marketing Seconds	er Oath				
Notana	My Commission Expir	es						
14414	January 92, 2026	Official Seal						
Title of Officer Authdrized to Administer Oath TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS A	CCOMPANIED BY THE RECLUBER	FILING FEE (14	Annlicable)	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 regeived. Voter Registration Status Verified								
John Sand Comment of the Comment of								
1812122 515177 (See	Section 1.007)	per						
Date Received Date Accepted	Signature of Fi	ling Officer or I	Designee					
			Print	Reset				

APPOINTMENT OF A CAMPAIGN TREASURER FORM CTA **BY A CANDIDATE**

See CTA Instruction Guide for detailed instructions.				1 Total pages filed:		
2 CANDIDATE NAME	Dr. Brianne		MI	OFFICE USE ONLY		
		LAST SUFFI		Date Received 811213		
CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUI	ITE #, CITY;	STATE; ZIP CODE			
	nya atau atau atau atau atau atau atau at		and the second of the second o	Date Hand-delivere	d or Postmarked	
4 CANDIDATE PHONE	AREA CODE PHONE N	IUMBER	EXTENSION	Receipt# Date Processed	Amount\$	
OFFICE HELD (if any)				Date Imaged	8118122	
S OFFICE SOUGHT (if known)	NISD Board	of truster	es sout a	t laya	L	
CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST	MI	NICKNAME	LAST 0	SUFFIX	
1	Mrs. Si	immer	M	-aake	2	
CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
(residence or business)					· • • • 2	
CAMPAIGN TREASURER PHONE	AREA CODE PHONE N	IUMBER	EXTENSION		•	
CANDIDATE SIGNATURE	I am aware of the N	lepotism Law, Cl	napter 573 of the Te	xas Govern	ment Code.	
	I am aware of my re the Election Code.	esponsibility to fi	le timely reports as	required by	title 15 of	
	I am aware of the refrom corporations a			ode on conf	tributions	
	Mull Was Signature	MUM e of Candidate	8	1012Z Date Signe	ed	
		GO TO PAGE	- 2			

11 CANDIDATE Branne Harryman NAME 12 MODIFIED **COMPLETE THIS SECTION ONLY IF YOU ARE** REPORTING **CHOOSING MODIFIED REPORTING DECLARATION** This declaration must be filed no later than the 30th day before the first election to which the declaration applies. •• •• The modified reporting option is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.) . Candidates for the office of state chair of a political party may NOT choose modified reporting. .. I do not intend to accept more than \$940 in political contributions or make more than \$940 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report. Year of election(s) or election cycle to which declaration applies

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us
or mail to

Texas Ethics Commission

P.O. Box 12070

Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to: https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php