Prescribed by Secretary of State 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

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STATE   ZIP	TO: City Secretary/Secretary of Board	-		(name of	election)				
Strict 3 Trustee  LI NAME (First, Middle, Last)  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  REVIN , Michael, Foster  RIMANENT RESIDENCE ADDRESS (Do not include a P.O. 80x or Rural Route: If  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  REVIN FOSter  RIMANENT RESIDENCE ADDRESS (Do not include a P.O. 80x or Rural Route: If  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  REVIN FOSter  RIMANENT RESIDENCE ADDRESS (Do not include a P.O. 80x or Rural Route: If  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  REVIN FOSTER  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  REVIN FOSTER  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*  PRINT NAME AS YOU WANT IT TO A		e above-na	med official	ballot as	a candidat	e for the office	indicated b	elow.	
RAMAEL FIRST, Middle, Last)  PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* Kevin Foster  Kannamer Residence address, describe location of residence.)  SOOD Evans Avenue  STATE  ZIP  TEXAS  TEXAS  TEXAS  TEXAS  TEXAS  TOTIC  STATE  ZIP  CITY  STATE  ZIP  COMPATION (Do not leave blank)  DATE OF BIRTH  NUMBER! (Optional)  NUMBER! (O	OFFICE SOUGHT (Include any place num	ber or oth	er distinguis	shing nun	nber, if any.	,	TERM		
EVIN, MIChael, Foster  KRANAENT RESIDENCE ADDRESS (On not include a P.O. Box or Pairal Route. If Inches and the provided professor of residence). The professor of residence address, describe location of residence. If Inches and the provided professor of residence address, describe location of residence. If Inches and the provided professor of residence address, describe location of residence. If Inches and the provided professor of the professo	District 3 Trustee					FULL		UNEXPIRI	ED
RMANEAT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you not have a residence address, describe location of residence.)  To not have a residence address, describe location of residence.)  To Not Devens Avenue  To S500 Evans Avenue  Towns  Tow	FULL NAME (First, Middle, Last)					ME AS YOU WA	NT IT TO AP	PEAR ON THE	BALLOT*
Comparison of the way a residence address, describe location of residence.	Kevin, Michael, Foster				Kevin Foster				
BLIC EMAIL ADDRESS (Optional) (Address for Any Coccupation (Do not leave blank) Professor    Coccupation (Do not leave blank)   DATE OF BIRTH   VOTER REGISTRATION VUID NUMBER? (Optional)   Professor	you do not have a residence address, describe			l Route. If				A CONTRACT OF THE PARTY OF THE	ich you receive
BLIC EMAIL ADDRESS (Optional)   Address for   OCCUPATION (Do not leave blank)   DATE OF BIRTH   VOTER REGISTRATION VUID (In you receive campaign related emails, if available.)   Professor   Professor   Professor   OCCUPATION (Do not leave blank)   Professor   Cell:    Office:   Cell:	CITY	STATE	ZIP		CITY			STATE	ZIP
Carrier   County	Austin	Texas	7875	1					
LEPHONE CONTACT INFORMATION (Optional)  met.  Office:  Cell:  LONY CONVICTION STATUS (TowUST check one)  I have not been finally convicted of a felony.  I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application.  IN THE STATE OF TEXAS  IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED and pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application.  In THE STATE OF TEXAS  IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED with the submission of this application.  In THE STATE OF TEXAS  IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED which the submission of this application.  In THE STATE OF TEXAS  IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED which the submission of the submission of the submission of the submission of this application.  In THE STATE OF TEXAS  IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED WHICH THE OFFICE SOUGHT IS E	PUBLIC EMAIL ADDRESS (Optional) (Address which you receive campaign related emails, if available	e.)		o not lea	ve blank) DATE OF BIRTH			VOTER REGISTRATION VUID NUMBER <sup>2</sup> (Optional)	
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I have not been finally convicted of a felony.  I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. <sup>3</sup> 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 the constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have not make the property of this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Text cition Code regarding the rules for how names may be listed on the official ballot.  For me, the undersigned authority, on this day personally appeared (name of candidate)  For me, the undersigned authority, on this day personally appeared (name of candidate)  For me, the undersigned authority, on this day personally appeared (name of candidate)  For me, the undersigned authority, on this day personally appeared (name of candidate)  For the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws so of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws so state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be fully mentally incapacitated or partially incapacitated or if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities or your felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities or your felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony convictus as a class B misdemeanor. I further		check one		LENGTI	OF CONTIN	UOUS RESIDENC		E THIS APPLICA	TION WAS SWORN
Have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application.\(^1\)  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 trinckname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I he no 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 Textion Code regarding the rules for how names may be listed on the official ballot.  For me, the undersigned authority, on this day personally appeared (name of candidate)  Well Forter  of Textic  County, Texas, may a candidate for the office of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or particularly incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disciply prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities by such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony convictions and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities by such final felony conviction. I am aware that the foregoing statements included in my application are in all things true and correct that the foregoing statements included in my application are in all things true and correct that the foregoing statements included in my application are in all things true and correct that the for					IN THE STATE OF TEXAS IN TERE			RITORY/DISTRICT/PRECINCT FROM	
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SIGNATURE OF CANDIDATE  orn to and subscribed before me this the 23 day of (day) (month) (year) (name of candidate)  printed Name of Officer Authorized to Administer Oath  ARAGE AI Printed Name of Officer Authorized to Administer Oath  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.  Is document and \$ filing fee or a nominating petition of pages received.  CSee Section 1.007)  Signature of Filing Officer or Designee	any prior felony conviction, and it so conv	are that kn	provide prov owingly prov	or that i n viding fals	ave been pa	on on the applic	wise release	d from the res	ulting disabilities e folony convictio
SIGNATURE OF CANDIDATE  orn to and subscribed before me this the 23 day of July 2024 by Kevin Fostoz  (day) (month) (year) (name of candidate)    SAIAH     AREA    Printed Name of Officer Authorized to Administer Oath   Printed Name of Officer Authorized to Administer Oath   SOE CALADINA ATTACHMENT   Printed Name of Officer Authorized to Administer Oath   SOE CALADINA ATTACHMENT   Printed Name of Officer Authorized to Administer Oath	tatus constitutes a Class B misdemeanor.	I further s	wear that the	e foregoir	ng statement	ts included in m	ation regard	are in all thing	s true and correct
orn to and subscribed before me this the 23 day of Suly 2024 by Kavin Fostaz  (day) (month) (year) (name of candidate)    SATAH VILAREAI     Printed Name of Officer Authorized to Administer Oath   Printed Name of Officer Authorized to Administer Oath   SEE CALLERY OF 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. Is document and \$ filing fee or a nominating petition of pages received.   Voter Registration Status Verified				V	V.	71			
orn to and subscribed before me this the 23 day of Suly 2024 by Kavin Fostaz  (day) (month) (year) (name of candidate)    SATAH VILAREAI     Printed Name of Officer Authorized to Administer Oath   Printed Name of Officer Authorized to Administer Oath   SEE CALLERY OF 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. Is document and \$ filing fee or a nominating petition of pages received.   Voter Registration Status Verified				Λ	-	- lostin	<u> </u>		
(day) (month) (year) (name of candidate)    SATAH     AREA    Printed Name of Officer Authorized to Administer Oath   SEE CALLERY   Officer Authorized to Administer Oath   SEE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:    CASH	Swarn to and subsoribed before we this A	. 23	1	ulu		and the state of t		Enchan	
SATAH	sworn to and subscribed before me this ti		day of	(month)					latel
Printed Name of Officer Authorized to Administer Oath  SEE CALCENDATE OF Officer Authorized to Administer Oath  e of Officer Authorized to Administer Oath  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.  is document and \$ filing fee or a nominating petition of pages received. Voter Registration Status Verified    Voter Registration Status Verified	1 - 1 - 1	(00))		(monen)	1		luc'	manie of carrol	iate)
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te Received Date Accepted Signature of Filing Officer or Designee	This document and \$ filing fe	e or a non	ninating peti	ition of _	page	s received.	☐ Vote	r Registration	Status Verified
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			P.C.					Print	Reset

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.					
State of California County of San Bornardino					
Subscribed and sworn to (or affirmed) before me on this 23 day of Tuly, 2024, by Kevin Fosters.					
proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.					
ISAIAH VILLARREAL Notary Public - California San Bernardino County Commission # 2408313 My Comm. Expires Jun 17, 2026					
(Seal) Signature formation					

Attached to: Application For A Place on Ballot - TEXAS