ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

| APPLICATION FOR A PLACE ON THE November 3, 2020 GENERAL ELECTION BALLOT | | | | | | | | |
|--|----------------|-------------------|-------------------|--|----------|--|-------------------------------|--|
| TO: City Secretary/Secretary of Board | | | | | | | | |
| 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.) INDICATE TERM | | | | | | | | |
| X FI 1 | | | | | | | | |
| Austin ISD Trustee At-Large Position 8 | | | | | | | | |
| FULL NAME (First, Middle, Last) | | | | PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT ¹ | | | | |
| Leticia Moreno Caballero | | | | Leticia Moreno Caballero | | | | |
| PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural | | | | PUBLIC MAILING ADDRESS (Campaign mailing address, if available.) | | | | |
| Route. If you do not have a residence address, describe the address | | | | PODEC MUNICIPA VADAGES (combasti mannis acciers) is a amorati | | | | |
| at which you receive personal mail and location of residence.) | | | | | | | | |
| 2805 Onslow Drive, Austin, Texas 78748 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | 710 | CITY | | | STATE | ZIP | |
| CITY Austin | STATE Texas | ZIP 78748 | CITT | | | JIAIC | Lir | |
| Austri | | 16 Editu 4960 | | | | | | |
| PUBLIC EMAIL ADDRESS (If available) | OCCUPA | ATION (Do not lea | ave blank) | DATE OF BIRTH | | | EGISTRATION VUID (Optional) 2 | |
| leticiacaballero3@gmail.com | Lobb | pyist | | | / | 114063 | 287 | |
| 10 / 18 / 19/3 | | | | | | | | |
| (323111011101111111111111111111111111111 | | | | | | - Control of the Cont | RRITORY FROM WHICH THE | |
| | | | | | | FICE SOUGHT IS ELECTED ³ | | |
| Work: | | | 46 year (s) | | | | | |
| Cell: | | | month(s) month(s) | | | | | |
| 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 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. | | | | | | | | |
| Before me, the undersigned authority, on this day personally appeared (name) LETIBLE CARALLERO, who being by me | | | | | | | | |
| here and now duly sworn, upon oath says: | | | | | | | | |
| "I, (name) Leticia Caballero of Travis County, Texas, being a | | | | | | | | |
| "I, (name) LETICIA CUDATIETO of TYUVIS County, Texas, being a candidate for the office of AISD Tyustee Position 9 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 of the United States eligible to hold such office under the constitution and laws of | | | | | | | | |
| this state. I have not been finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other | | | | | | | | |
| official action. 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 further swear that the foregoing statements included in my application are in all things true and correct." | | | | | | | | |
| Y (Ild. Com) amount | | | | | | | | |
| | | Λ | - | The a | | | EXIS C | |
| | A | Abia aba | 7 1 day | SIGNATURE O | F CANDID | | NOTAR | |
| Sworn to and subscribed before me at ASTN, TEXT, this the 21 day of JULY, 2020 | | | | | | | | |
| | | | | | | | | |
| Mas (hore) NOITHRY FUELL | | | | | | | | |
| Signature of Officer Administering Oath Title of Officer Administering Oath To be conspicted by CITY SECRETARY OF SOARD: | | | | | | | | |
| TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD: (See Section 1.007) | | | | | | | | |
| Date Received Signature of Secretary | | | | | | | | |
| Voter Registration Status Verified | | | | | | | | |