

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 required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>Cedar Hill Board Trustee 7</u> GENERAL ELECTION BALLOT					
TO: City Secretary/Secretary of Board (name of election)					
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.) <u>Cedar Hill Board Trustee Place 7</u>				INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED	
FULL NAME (First, Middle, Last) <u>Shomega Chyon Daniels-Austin</u>			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>Shomega Daniels-Austin</u>		
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>1364 Fox Glenn Dr.</u>			PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.) <u>P.O. Box 382906</u>		
CITY <u>Cedar Hill</u>	STATE <u>TX</u>	ZIP <u>75104</u>	CITY <u>Duncanville</u>	STATE <u>TX</u>	ZIP <u>75138</u>
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.) <u>austin.agency@att.net</u>		OCCUPATION (Do not leave blank) <u>Owner of Austin Insurance Agency</u>		DATE OF BIRTH <u>12/05/1979</u>	
TELEPHONE CONTACT INFORMATION (Optional) Home: <u>(214) 772-3495</u> Office: _____		VOTER REGISTRATION VOID NUMBER ² (Optional)			
FELONY CONVICTION STATUS (You MUST check one)		LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN			
<input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> 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. ³		IN THE STATE OF TEXAS <u>44</u> year(s) <u>2</u> month(s)		IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED <u>20</u> year(s) <u>2</u> 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 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 prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>Shomega Daniels-Austin</u> who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>Shomega Daniels-Austin</u> of <u>Dallas</u> County, Texas, being a candidate for the office of <u>CHSD Place 7</u> , 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 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."					
<u>X Shomega Austin</u> SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this the <u>16</u> day of <u>February</u> , <u>2024</u> by <u>Shomega Daniels-Austin</u> (day) (month) (year) (name of candidate)					
Signature of Officer Authorized to Administer Oath ⁴ <u>Courtney L. Wilson</u> Executive Assistant			Signature of Officer Authorized to Administer Oath <u>Courtney L. Wilson</u> Notary ID #131033273 My Commission Expires September 14, 2025		
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY: <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE. This document and \$ _____ filing fee or a nominating petition of _____ pages received. <input type="checkbox"/> Voter Registration Status Verified					
Date Received _____		Date Accepted _____		(See Section 1.007)	
Signature of Filing Officer or Designee _____					

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

2 CANDIDATE
NAME

MS / MRS / MR MRS. FIRST Shomega MI C
Daniels-Austin

OFFICE USE ONLY

Filer ID #

Date Received

NICKNAME LAST SUFFIX

3 CANDIDATE
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1364 Fox Glenn Dr.
Cedar Hill, TX 75104

Date Hand-delivered or Postmarked

4 CANDIDATE
PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 772-3495

Receipt #

Amount \$

Date Processed

5 OFFICE
HELD
(if any)

Date Imaged

6 OFFICE
SOUGHT
(if known)

Cedar Hill ISD School Board Trustee Place 7

7 CAMPAIGN
TREASURER
NAME

MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX
Mrs. Jada P. Austin

8 CAMPAIGN
TREASURER
STREET
ADDRESS
(residence or business)

STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE
1364 Fox Glenn Dr.
Cedar Hill, TX 75104

9 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 772-3495

10 CANDIDATE
SIGNATURE

I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.

I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.

I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Shomega Austin
Signature of Candidate

02/16/24
Date Signed

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