

DECLARATION OF WRITE-IN CANDIDACY FOR CITIES, SCHOOL DISTRICTS AND OTHER POLITICAL SUBDIVISIONS
INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.**DECLARATION OF WRITE-IN CANDIDACY FOR** Lewisville ISD Board of Trustees

(Name of City, School District or Other Political Subdivision)

TO: Filing Officer

I declare that I am a write-in candidate for the office indicated below.

OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)**INDICATE TERM**☐ FULL☒ UNEXPIRED**FULL NAME** (First, Middle, Last)Madison Celeste Lopez**PRINT NAME AS YOU WANT IT TO APPEAR ON THE LIST OF DECLARED WRITE-IN CANDIDATES***Madison Lopez**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.)1916 Teton Trail**PUBLIC MAILING ADDRESS (Optional)** (Address for which you receive campaign related correspondence, if available.)**CITY**Lewisville**STATE**TX**ZIP**75077**CITY****STATE****ZIP****PUBLIC EMAIL ADDRESS (Optional)** (Address for which you receive campaign related emails, if available.)vote.madison4LISD@gmail.com**OCCUPATION** (Do not leave blank)Attorney**DATE OF BIRTH**11/09/98**VOTER REGISTRATION VOID NUMBER² (Optional)****TELEPHONE CONTACT INFORMATION (Optional)**

Home:

Office:

Cell:

FELONY CONVICTION STATUS (You MUST 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.³**LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN****IN THE STATE OF TEXAS**25 year(s)1 month(s)**IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED**23 year(s)7 month(s)**This Box Must ONLY be Completed by Candidates for School District Board of Trustees****Check the Box Below:**☒ I am aware that I am not eligible to serve as a trustee of an independent school district if I am required to register as a sex offender under Chapter 62, Code of Criminal Procedure.

*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) _____, who being by me here and now duly sworn, upon oath says:

"I, (name of candidate) Madison Lopez _____ of Denton County, Texas, being a candidate for the office of Lewisville ISD Board of Trustees, 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."X Madison Lopez
SIGNATURE OF CANDIDATESworn to and subscribed before me this the 3rd day of September, 2025, by Madison Lopez.

(day)

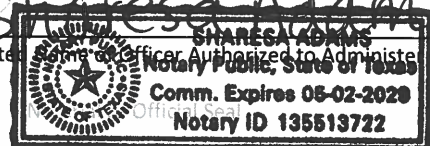
(month)

(year)

(name of candidate)

Sharesa AdamsSignature of Officer Authorized to Administer Oath⁴Sharesa Adams

Printed Name of Officer Authorized to Administer Oath



Title of Officer Authorized to Administer Oath

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 received. ☐ Voter Registration Status Verified_____/_____/_____
Date Received_____/_____/_____
Date Accepted

(See Section 1.007)

Signature of Filing Officer or Designee