2-49
Prescribed by Secretary of State
Section 141.031, Chapters 143 and 144, Texas Election Code; Section 11.055, Texas Education Code
07/2025

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 OPTIONAL[1] Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE Carrollton-Farmers Branch ISD **GENERAL ELECTION BALLOT**
(name of election)

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.)
CFBISD Board of Trustees

INDICATE TERM
☑ FULL ☐ UNEXPIRED

FULL NAME (First, Middle, Last)
Carolyn Elizabeth Benavides

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*
Carolyn Benavides

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.)
2914 Panorama Drive

PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)

CITY	STATE	ZIP
Carrollton	TX	75007

CITY	STATE	ZIP

PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)
benavidescarolyn@gmail.com

OCCUPATION (Do not leave blank)
business owner

DATE OF BIRTH [redacted]

VOTER REGISTRATION VUID NUMBER[2] (Optional)

TELEPHONE CONTACT INFORMATION (Optional)
Home: Office: 972.416.6555 Cell: 2148370569

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	IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED
65 year(s)	65 year(s)
05 month(s)	06 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) Carolyn Elizabeth Benavides who being by me here and now duly sworn, upon oath says:
"I, (name of candidate) Carolyn Elizabeth Benavides, of Denton County, Texas, Being a candidate for the office of _____, 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 _____
SIGNATURE OF CANDIDATE

Sworn to and subscribed before me this the 14th (day) day of January (month), 2026 (year), by Carolyn Elizabeth Benavides (name of candidate)

Kimberly Castanon
Signature of Officer Authorized to Administer Oath[4]

KIMBERLY CASTANON
Notary Public, State of Texas
Comm. Expires 05-06-2027
Notary ID 448117
Notarial or Official Seal

Kimberly Castanon
Printed Name of Officer Authorized to Administer Oath

Notary
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**

01/14/2026 Date Received
01/14/2026 Date Accepted **(See Section 1.007)**
Kimberly Castanon
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: ~~Ms~~ FIRST: Carolyn MI: E

NICKNAME: ~~Delvalle~~ LAST: Benavides SUFFIX:

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2914 Panorama Drive
Carrollton, TX 75007

4 CANDIDATE PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 537-0569

5 OFFICE HELD (if any)

School board Trustee

6 OFFICE SOUGHT (if known)

School board Trusee

7 CAMPAIGN TREASURER NAME

MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX

Mike Delvalle

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE

2816 Lineville #103C
Farmers Branch, TX 75234

9 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(972) 814-2264

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.

Signature of Candidate

01/14/26
Date Signed

OFFICE USE ONLY

Filer ID #

Date Received

Date Hand-delivered or Postmarked: 1/14/2026

Receipt # | Amount $

Date Processed

Date Imaged

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CANDIDATE MODIFIED REPORTING DECLARATION

11 CANDIDATE NAME	
12 MODIFIED REPORTING DECLARATION	**COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING**

•• 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 or county chair of a political party may NOT choose modified reporting. ••

I do not intend to accept more than $1,110 in political contributions or make more than $1,110 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

Signature of Candidate

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