

**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>May 7, 2022 Dallas College</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.) Dallas College Trustee, Place 4 | | | INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED | | |
| FULL NAME (First, Middle, Last) Monica Lira Bravo | | | PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* Monica Lira Bravo | | |
| 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.) [REDACTED] | | | PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.) 4144 N. Central Expwy Suite 300 | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP [REDACTED] | CITY Dallas | STATE TX | ZIP 75204 |
| PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.) Trustee@lirabravo.com | | OCCUPATION (Do not leave blank) Attorney | DATE OF BIRTH [REDACTED] | VOTER REGISTRATION VOID NUMBER ² (Optional) [REDACTED] | |
| TELEPHONE CONTACT INFORMATION (Optional) Home: [REDACTED] Office: 214-390-6294 Cell: [REDACTED] | | | | | |
| FELONY CONVICTION STATUS (You MUST check one) <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 | | LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN IN THE STATE OF TEXAS 40 year(s) 6 month(s) IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED 11 year(s) 1 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>Monica Lira Bravo</u> , who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>Monica Lira Bravo</u> , of <u>Dallas</u> County, Texas, being a candidate for the office of <u>Dallas College Trustee, Place 4</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." | | | | | |
| X <u>[Signature]</u> SIGNATURE OF CANDIDATE | | | | | |
| Sworn to and subscribed before me this the <u>7th</u> day of <u>February</u> , <u>2022</u> , by <u>Monica Lira Bravo</u> . (day) (month) (year) (name of candidate) | | | | | |
| <u>[Signature]</u> Signature of Officer Authorized to Administer Oath ⁴ | | | <u>Rosaura Tudon Fernandez</u> Printed Name of Officer Authorized to Administer Oath | | |
| <u>Notary Public</u> 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: <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 <u>3</u> pages received. <input checked="" type="checkbox"/> Voter Registration Status Verified | | | | | |
| <u>2 / 7 / 2022</u> Date Received | | <u>2 / 7 / 2022</u> Date Accepted | | (See Section 1.007) <u>[Signature]</u> Signature of Filing Officer or Designee | |

AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM ACTA
PG 1

1 CANDIDATE NAME Monica Lira Bravo

2 FILER ID#

3 Total pages filed:

3

See ACTA Instruction Guide for detailed instructions.

Use this form for changes to existing information only. Do not provide information previously disclosed.

4 CANDIDATE NAME

NEW

MS / MRS / MR

FIRST

MI

Monica

L

NICKNAME

LAST

SUFFIX

Bravo

OFFICE USE ONLY

Date Received

FEB - 7 2022

5 CANDIDATE MAILING ADDRESS

NEW

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

4144 N. Central Expwy Ste. 300, Dallas, TX 75204

Date Hand-delivered or Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

6 CANDIDATE PHONE

NEW

AREA CODE

PHONE NUMBER

EXTENSION

(214) 390-6294

7 OFFICE HELD (if any)

NEW

Dallas College Trustee, Place 4

8 OFFICE SOUGHT (if known)

NEW

Dallas College Trustee, Place 4

9 CAMPAIGN TREASURER NAME

NEW

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Nancy

A

Bernardino

10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

NEW

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3138 Dusty Oak Dr.

Dallas

TX

75227

11 CAMPAIGN TREASURER PHONE

NEW

AREA CODE

PHONE NUMBER

EXTENSION

(214) 293-7925

12 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

Date Signed

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AMENDMENT:
CANDIDATE MODIFIED REPORTING DECLARATION

FORM ACTA
PG 2

**13 CANDIDATE
NAME**

Monica Lira Bravo

**14 MODIFIED
REPORTING
DECLARATION**

NEW

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

I do not intend to accept more than \$940 in political
contributions or make more than \$940 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>