2-49
Prescribed by Secretary of State
Section 141.031, Chapters 143 and 144, Texas Election Code

APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION

LL INFORMATION IS REQUIRED TO BE PROVID	ED UNLESS IND	ICATED /	AS OPTIONA	AL¹ Failure to	provide requi		The second secon			
APPLICATION FOR A PLACE	ON THE N	OVEN				GENE	RAL ELECTI	ON BALLOT		
TO: City Secretary/Secretary of Board				election)						
I request that my name be placed on the		The second second					elow.			
OFFICE SOUGHT (Include any place nur	ishing nun									
JUDGE MUNICIPAL COURT NO. 3				FULL			UNEXPIRED			
FULL NAME (First, Middle, Last)				PRINT NAME AS YOU WANT IT TO A			PPEAR ON THE BALLOT*			
DAVID ANDREW BONILLA				DAVID A. BONILLA						
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural				보이다면서 아무리 나는 그렇게 하면 하는데 하는데 이번 사람들이 되었다면 하는데						
you do not have a residence address, describe		campaign related correspondence, if available.)								
		STATE ZIP			CITY COLOR					
CITY	STATE	ZIP		CITY			STATE	ZIP		
EL PASO	TEXAS									
PUBLIC EMAIL ADDRESS (Optional) (Addre	ss for OCCUP	ATION (Do not lea	ve blank)	DATE OF BII	RTH	VOTER REG	ISTRATION VUID		
which you receive campaign related emails, if availab	which you receive campaign related emails, if available.)			AND DESCRIPTION OF THE PROPERTY OF THE PROPERT			NUMBER ² (Optional)			
abonilla law Ogmo	M. COMOD	GE								
TELEPHONE CONTACT INFORMATION (O		0.4	(E 504)	2052			The state of the s			
				5-594-9952 Cell:						
FELONY CONVICTION STATUS (You MUST			1					TION WAS SWORN		
I have not been finally convicted of a felony.			IN:	THE STATE	OF TEXAS	IN TERRITORY/DISTRICT/PRECINCT FROM				
I have been finally convicted of a felony, but I have been				26	year(s)	WHICH TI		HE OFFICE SOUGHT IS ELECTED		
pardoned or otherwise released from the resulting			year(s)							
disabilities of that felony conviction and I have provided			3 month(s)				3 month(s)			
proof of this fact with the submission of this application. ³ — 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 sloga	n or contain a	title. no	r does it in	dicate a pol	itical. econom	ic. social, or re	eligious view o	r affiliation I have		
been commonly known by this nickname										
Election Code regarding the rules for how	names may be	listed o	n the offici	al ballot.						
Before me, the undersigned authority, on	this day person	nally app	peared (nar	ne of candi	date) DAVII	A. BON	ILLA	, who		
Deing by me here and now duly sworn, up	ion oath savs:							,		
"I, (name of candidate) DAVID A. BONILLA				of EL PASO			County, Texas,			
being a candidate for the office of July	dge Munic	ipal C	ourt No	. 3		I will support		e Constitution and		
laws of the United States and of the State										
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."										
	Transier Swed	i that th	ic foregoing	11	s medicum m	ny application	are in all timig.	struc and correct.		
			X.	"L	/ un	-	100			
SIGNATURE OF CANDIDATE										
Sworn to and subscribed before me this the		of	014	1 2	2024 by		A. Boni			
	(day)		(month)		(year)	{r	name of candid	late)		
MI HM.				Va.	LE POTENZIO DE SUPERIORE		MARKE	-		
Signature of Officer Authorized to Adminis	ster Oath4				ted Name of C		A to AROLA	BY PLENIC		
	ster Odul			FIII	ted Name of C		ID POUT TO	3466383-5		
Notory Poblic					Notarial or	Of cia. Long	My Come	niesion Expires		
Title of Officer Authorized to Administer C		- I well				1	11-	30-2027		
TO BE COMPLETED BY FILING OFFICER:	THIS APPLICA	TION IS	ACCOMP	ANIED BY	THE REQUIRE	D FILING FEE	If Applicable	PAID BY:		
CASH CHECK MONEY ORDER CASHIERS CHECK OR PETITION IN LIEU OF A FILING FEE.										
	e or a nomina						Registration :	Status Verified		
7,22,2024 7,3	22/2024	(S	ee Section	하면 없다일까다 하면 하루 그래요	Kaur	2D. Hu	ne			
Date Received Date Accep	oted				Signature of Fi	ling Officer or	Designee			