

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>Meadow Lakes City Council</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.)			INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED		
FULL NAME (First, Middle, Last) BARBARA ELLEN PESKIN			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* BARBARA E. PESKIN		
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.) 152 NELSON PLACE			PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.)		
CITY MEADOWLAKES	STATE Tx	ZIP 78654	CITY	STATE	ZIP
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.)		OCCUPATION (Do not leave blank) TAX PREPARER BOOKKEEPER	DATE OF BIRTH 04/02/1976	VOTER REGISTRATION VOID NUMBER ² (Optional)	
TELEPHONE CONTACT INFORMATION (Optional) Home: (830) 998-8896 Office: Cell: (512) 731-8800					
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 50 year(s) _____ month(s)		IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED 23 year(s) _____ 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>Barbara E. Peskin</u> , who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>BARBARA E PESKIN</u> , of <u>Burnet</u> County, Texas, being a candidate for the office of <u>City Council, Place 2</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>Barbara E. Peskin</u> SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this the <u>3rd</u> day of <u>February</u> , <u>2023</u> , by <u>Barbara E. Peskin</u> (day) (month) (year) (name of candidate)					
Signature of Officer Authorized to Administer Oath ⁴ <u>Joanne Dixon</u> Title of Officer Authorized to Administer Oath <u>Administrative Asst.</u>			Printed Name of Officer Authorized to Administer Oath JOANNE DIXON My Notary ID # 12375397 Expires June 30, 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					
<u>2/3/23</u> Date Received		<u>2/3/23</u> Date Accepted		(See Section 1.007) <u>Guantanamo</u> 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:

3

OFFICE USE ONLY

Filer ID #

Date Received

2/3/23

Date Hand-delivered or Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

2 CANDIDATE NAME

MS / MRS / MR

Ms.

FIRST

BARBARA

MI

E.

NICKNAME

LAST

PECKIN

SUFFIX

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

152 NELSON PLACE

MEADOWLAKE, TX 78654

4 CANDIDATE PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 731-8800

5 OFFICE HELD (if any)

6 OFFICE SOUGHT (if known)

7 CAMPAIGN TREASURER NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

TIMOTHY G.

LAURENT

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE):

APT / SUITE #:

CITY:

STATE:

ZIP CODE

152 NELSON PLACE

MEADOWLAKE, TX 78654

9 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(714) 904-5498

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

01-17-2023

Date Signed

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**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

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

I do not intend to accept more than \$930 in political contributions
or make more than \$930 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.

2023-2025
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>