AW2-15, 7/2011 Prescribed by Secretary of State Sections 141.031, 143.004, 143.006, Texas Election Code

All information is required to be provided unless indicated as optional.

AUSTIN CITY CLERK RECEIVED

TO: City Secretary 1 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 manther or other distinguishing number, if any. Autiful City Concur, Sent 5 FULL NAME (First, Middle, Lans) LU ALEY CHUSHINE Canna PERMANER FIRST, MARIE (Sent, Middle, Lans) LU ALEY CHUSHINE Canna PERMANER FIRST, MARIE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rurall St. CITY STATE AUTIFUL TY STATE AUTIFUL STATE LU ALEY TY TO ADDRESS (Ortona) OCCUPATION (Do not leave blank) DATE OF BIRTH (of applicable) Long the of Continuous Residence as of Date Application Sworn DISTATE LU ALEY TY TELEPTIONE NUMBER (Include area code) (Optional) Long the of Continuous Residence as of Date Application Sworn OFFICE: 512 2923—2541 BOME: If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following satements: I further swear that my nickname does not constitute a slogan nor deed it indicate a political, community known by this nockname for a least theory are the serious. If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following satements: I further swear that my nickname does not constitute a slogan nor deed it indicate a political, community, social, or religious view or affiliation. I have been community known by this nockname for a least there are the name of the community in the property of the size of texts. I am a citizen of the United States eligible to hold such office and of Tiday. NOTE CONTY. Tools, being a candidate for the office of Lang Conty C	APPLICATIO	ON FOR A PLACE ON	THE CITY OF	- Qus	TIN	,	201	GENERAL	ELECTION BALLOT	•	
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Austin City Cuncy, Seat 5 FULL NAME (First, Middle, Last) Audley Christine Comnen FERMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) GREMANENT RESIDENCE ADDRESS (Street address and apartment number. If none, describe location of residence. Do not include P.O. Box or Rural Rt.) GREMAL ADDRESS (Optional) CITY STATE EMAIL ADDRESS (Optional) COCUPATION (Do not leave blank) TCAHUDAN PINACANINAL OF CHARMENT CHARMENT OF C	I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.										
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(See Section 1.007) Date Received Signature of City Secretary	TO BE COMPLETED I	BY CITY SECRETARY:	:			0//	,_	Λ	λ -		
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