

# 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<sup>1</sup> Failure to provide required information may result in rejection of application.

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| <b>APPLICATION FOR A PLACE ON THE</b> <u>EISD BOARD TRUSTEE</u> <b>GENERAL ELECTION BALLOT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <b>OFFICE SOUGHT</b> (Include any place number or other distinguishing number, if any.)<br><u>PLACE 2</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                           |                                                                |                                                                                                                         | <b>INDICATE TERM</b><br><input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED |                            |
| <b>FULL NAME</b> (First, Middle, Last)<br><u>FRANK ESPINOSA</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | <b>PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*</b><br><u>FRANK ESPINOSA</u>                                      |                                                                                                     |                            |
| <b>PERMANENT RESIDENCE ADDRESS</b> (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.)<br><u>3630 W. POPLAR</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | <b>PUBLIC MAILING ADDRESS (Optional)</b> (Address for which you receive campaign related correspondence, if available.) |                                                                                                     |                            |
| <b>CITY</b><br><u>S.A.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>STATE</b><br><u>TX</u> | <b>ZIP</b><br><u>78228</u>                                     | <b>CITY</b><br><u>S.A.</u>                                                                                              | <b>STATE</b><br><u>TX</u>                                                                           | <b>ZIP</b><br><u>78228</u> |
| <b>PUBLIC EMAIL ADDRESS (Optional)</b> (Address for which you receive campaign related emails, if available.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           | <b>OCCUPATION (Do not leave blank)</b><br><u>SELF-EMPLOYED</u> |                                                                                                                         | <b>DATE OF BIRTH</b><br><u>10/22/1968</u>                                                           |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                |                                                                                                                         | <b>VOTER REGISTRATION VUID NUMBER<sup>2</sup> (Optional)</b>                                        |                            |
| <b>TELEPHONE CONTACT INFORMATION (Optional)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| Home:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           | Office:                                                        |                                                                                                                         | Cell:                                                                                               |                            |
| <b>FELONY CONVICTION STATUS (You MUST check one)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           |                                                                | <b>LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN</b>                                             |                                                                                                     |                            |
| <input checked="" type="checkbox"/> I have not been finally convicted of a felony.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                                                | <b>IN THE STATE OF TEXAS</b>                                                                                            |                                                                                                     |                            |
| <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. <sup>3</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                           |                                                                | <b>IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED</b>                                           |                                                                                                     |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | <u>57</u> year(s)                                                                                                       |                                                                                                     |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | <u>4</u> year(s)                                                                                                        |                                                                                                     |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | month(s)                                                                                                                |                                                                                                     |                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                | month(s)                                                                                                                |                                                                                                     |                            |
| <b>This Box Must ONLY be Completed by Candidates for School District Board of Trustees</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <b>Check the Box Below:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <input checked="" type="checkbox"/> 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) <u>FRANK ESPINOSA</u> , who being by me here and now duly sworn, upon oath says:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| "I, (name of candidate) <u>FRANK ESPINOSA</u> , of <u>BEXAR</u> County, Texas, Being a candidate for the office of <u>EISD TRUSTEE</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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <b>SIGNATURE OF CANDIDATE</b><br><u>Frank Espinosa</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| Sworn to and subscribed before me this the <u>5</u> day of <u>August</u> , <u>2026</u> , by <u>Frank Espinosa</u> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| (day) (month) (year) (name of candidate)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <u>Amelia Michelle Castillo</u><br>Signature of Officer Authorized to Administer Oath <sup>4</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <u>Notary</u><br>Title of Officer Authorized to Administer Oath                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <b>TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (See Section 1.007) PAID BY:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |                                                                |                                                                                                                         |                                                                                                     |                            |
| <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>8/5/2026</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           | <u>8/5/2026</u>                                                |                                                                                                                         | (See Section 1.007)                                                                                 |                            |
| Date Received                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           | Date Accepted                                                  |                                                                                                                         | Signature of Filing Officer or Designee                                                             |                            |

