2-21
Prescribed by Secretary of State
Section 141.031, Chapters 143 and 144, Texas Election Code
1/2017

ALL INCODMATION IS DECLUDED TO BE DROVIDED LINESS INDIC	ATED OPTIONAL]	1/2017		
ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL					
TO: City Secretary/Secretary of Board					
I request that my name be placed on the above-named official OFFICE SOUGHT (Include any place number or other distinguis	the second s		NDICATE TERM		
Crice sought (include any place number of other distinguis	sining number, ir arry.)	Ĺ	7		
Kyle City MAYDR	2		FULL		
FULL NAME (First, Middle, Last)	PRINT NA	ME AS YOU WANT IT TO	APPEAR ON THE BALLOT ¹		
ERLINDA TENORIO	T	ELINDA TENORIO			
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box		PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)			
Route. If you do not have a residence address, describe the	address	A RAY U	Q		
at which you receive personal mail and location of residence.)	T.	O. BOX 4	0		
CITY STATE ZIP	CITY /	. 1	STATE ZIP		
Kyle TX 78	8640 R	t//e	TX 78640		
PUBLIC FMAIL ADDRESS (If available) OCCUPATION ((Do not leave blank)	DATE OF BIRTH	VOTER REGISTRATION VUID		
Retij	Pod		NUMBER (Optional) ²		
	hea		-		
TELEPHONE CONTACT INFORMATION (Optional)			F DATE APPLICATION SWORN		
Home:	IN STAT	E IP	OFFICE SOUGHT IS ELECTED ³		
Work:	Lito		10		
	rie,	ear (s)	69 year (s)		
Cell:	m	onth(s)	month(s)		
If using a nickname as part of your name to appear on the ball					
that my nickname does not constitute a slogan nor does it in commonly known by this nickname for at least three years pri-		onomic, social, or religio	ous view or affiliation. I have been		
commonly known by this neckname for at least three years pri-		- 1.1-	L .		
Before me, the undersigned authority, on this day personally a	appeared (name)	ERINDA 1	ENORIA who being by me		
here and now duly sworn, upon oath says:	1	11110			
"I, (name) ERLINCA, TENOR	10 1	JAVS	County, Texas, being a		
candidate for the office of Ryle City MAVOR swear that 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 finally convicted of a felony for which I have not been pardoned or had my full rights of citizenship restored by other					
official action. 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.					
partially mentally incapacitated without the right to vote. Fam aware of the nepotism law, chapter 575, Government code.					
I further swear that the foregoing statements included in my application are in all things true and correct."					
	X 4	1-1 Dano	10 8-14-202D		
		Marce no			
Sworn to and subscribed before me at Kule City tell	, this the 14th day	SIGNATURE OF CAN			
sworn to and subscribed before me at print corriging	, this the 14 - day	Mugust Let	SEAL		
Aunit Nitra		11-	JENNIFER ANN VETRANO My Notary ID # 126805359		
- Innifer A. Milano	Motary P		Expires February 17, 2021		
Signature of Officer Administering Oath ⁴ Title of Officer Administering Oath TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:					
(See Section 1.007)					
Date Received Signature of Secretary					
Voter Registration Status Verified		V			

CODE OF FAIR CAMPAIGN FORM CFCP COVER SHEET PRACTICES OFFICE USE ONLY Pursuant to chapter 258 of the Election Code, every candidate and Date Received political committee is encouraged to subscribe to the Code of Fair 8/14/202094 Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, Date Hand-delivered or Postmarked 1997, may subscribe to the code at any time. Date Processed Subscription to the Code of Fair Campaign Practices is voluntary. Date Imaged **1** ACCOUNT NUMBER 2 TYPE OF FILER (Ethics Commission Filers) CANDIDATE POLITICAL COMMITTEE If filing as a candidate, complete boxes 3 - 6, If filing for a political committee, complete boxes 7 and 8, then read and sign page 2. then read and sign page 2. TITLE (Dr., Mr., Ms., etc.) **3** NAME OF CANDIDATE FIRST MI (PLEASE TYPE OR PRINT) NICKNAME SUFFIX (SR., JR., III, etc.) **4** TELEPHONE NUMBER AREA CODE EXTENSION PHONE NUMBER OF CANDIDATE (PLEASE TYPE OR PRINT) APT / SUITE #: STATE ZIP CODE STREET / PO BOX: CITY-5 ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT) 8640 6 OFFICE SOUGHT Kyle MA BY CANDIDATE (PLEASE TYPE OR PRINT) 7 NAME OF COMMITTEE (PLEASE TYPE OR PRINT) MI TITLE (Dr. Mr. Ms. etc.) 8 NAME OF CAMPAIGN Adrian Tenorio TREASURER (PLEASE TYPE OR PRINT) NICKNAME SUFFIX (SR., JR., III, etc.) GO TO PAGE 2

CODE OF FAIR CAMPAIGN PRACTICES

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

enoño

Signature

8-14-2022

Date

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

See	CTA Instruction Guide for detailed instruction	15.	1 Total pages f	iled:
2 CANDIDATE NAME	MS (MRS) MR FIRST ERLINDA TEN NICKNAME LAST LINDA TENORIO	JORIO SUFFIX	Filer ID #	2020 gtt
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY:	STATE: ZIP CODE TR 7869		
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER	EXTENSION	Receipt # Date Processed	Amount \$
5 OFFICE HELD (if any)	NA		Date Imaged	
6 OFFICE SOUGHT (if known)	City OF Ryle - M	AYOR		
7 CAMPAIGN TREASURER NAME	MS/MREMAR FIRST MI AdriAN		ENDRID	SUFFIX
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUIT	Kyte	STATE;	ZIP CODE 78640
9 CAMPAIGN TREASURER PHONE	AREA CODE SUCHE MUMBER	EXTENSION		
0 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Ch	apter 573 of the	Texas Govern	nment Code.
	I am aware of my responsibility to fil the Election Code. I am aware of the restrictions in title from corporations and labor organization <i>Control of Candidate</i>	15 of the Election		tributions
	GO TO PAGE	2		

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 1/1/2020

CANDIDATE	MODIFIED
REPORTING	DECLARATION

_						
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 \$900 in political contributions or make more than \$900 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.				
		Withdrawn 8/27/2020				
		2020 Year of election (s) or election cycle to which declaration applies Signature of Candidate				
	This appoir	ntment 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				

Jennifer. This is linda Tenorio I wish to withdraw form cta. Candidate modified reporting declaration from my filing pkg/ internet. Need verification that it was done. Thank u. Stay safe.

Linda Tenorio Thu 8/27/2020 2:07 PM To: Jennifer Holm <jholm@cityofkyle.com>

Sent from my iPhone