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ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL  
**APPLICATION FOR A PLACE ON THE NOVEMBER 2, 2021 SPECIAL ELECTION BALLOT**  
 TO: City Secretary/Secretary of Board

**RECEIVED**

I request that my name be placed on the above-named official ballot as a candidate for the office indicated below. SEP 01 2021

**OFFICE SOUGHT** (Include any place number or other distinguishing number, if any.)  
PORT ARANSAS CITY COUNCIL PLACE 2 City Secretary  
Port Aransas, TX

**FULL NAME** (First, Middle, Last) VICTORIA LYNN STIEWIG **PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT**<sup>1</sup>  
VICTORIA STIEWIG

**PERMANENT RESIDENCE ADDRESS** (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.)  
1901 S. STATION #4  
PORT ARANSAS, TX 78373

**PUBLIC MAILING ADDRESS** (Campaign mailing address, if available.)  
1820 S. 11TH ST.  
PORT ARANSAS, TX  
78373

<b>CITY</b> <u>PORT ARANSAS</u>	<b>STATE</b> <u>TX</u>	<b>ZIP</b> <u>78373</u>	<b>CITY</b> <u>PORT ARANSAS</u>	<b>STATE</b> <u>TX</u>	<b>ZIP</b> <u>78373</u>
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**PUBLIC EMAIL ADDRESS** (If available) surfsidevpa@gmail.com **OCCUPATION** (Do not leave blank) OWNER OF SURFSIDE RV RESORT / / **DATE OF BIRTH** [REDACTED] **VOTER REGISTRATION VUID NUMBER** (Optional)<sup>2</sup>

**TELEPHONE CONTACT INFORMATION** (Optional)  
 Home: 361-746-8044  
 Work: 361-749-2208  
 Cell: 361-746-8044

**LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN**

<b>IN STATE</b> <u>51</u> year (s) ____ month(s)	<b>IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED</b> <sup>3</sup> <u>10</u> year (s) ____ month(s)
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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 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.

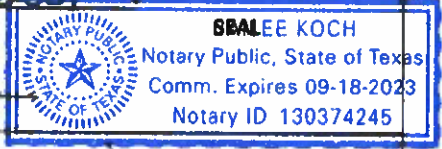
Before me, the undersigned authority, on this day personally appeared (name) Victoria Stiewig, who being by me here and now duly sworn, upon oath says:

"I, (name) VICTORIA STIEWIG of NUECES County, Texas, being a candidate for the office of PORT ARANSAS CITY COUNCIL, 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 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.

I further swear that the foregoing statements included in my application are in all things true and correct."  
X Victoria Stiewig  
 SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at Port Aransas, TX, this the 1st day of September, 2021

[Signature] Signature of Officer Administering Oath<sup>4</sup> Notary Public Title of Officer Administering Oath



TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:  
 (See Section 1.007)

9-1-2021 Date Received Chamissa Nixon Signature of Secretary

Voter Registration Status Verified