

25

APPLICATION FOR A PLACE ON THE Democratic PARTY GENERAL PRIMARY BALLOT FOR A FEDERAL OFFICE
 (Democratic or Republican)

TO: State/County Chair

FILED

I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.

NOV 13 2019

OFFICE SOUGHT (include any place number or other distinguishing number, if any.)
 U.S. House of Representatives TX-26

FULL NAME (First, Middle, Last)
 Carol Hiabee Iannuzzi

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT
 Carol H Iannuzzi

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.)
 712 Red Oak Drive

PUBLIC MAILING ADDRESS (Address for which you receive campaign related correspondence, if available.)
 1079 W. Round Grove Rd
 Suite 300 Box 317

CITY Lewisville	STATE TX	ZIP 75067	CITY Lewisville	STATE TX	ZIP 75067
PUBLIC EMAIL ADDRESS (if available) carol@carol2020.com			OCCUPATION (Do not leave blank) Retired Sr. Contracts Negotiator		
TELEPHONE CONTACT INFORMATION (Optional) Home: Work: Cell: 972-365-8345			DATE OF BIRTH 07/21/1960		
CONTINUOUS RESIDENCE IN STATE AS OF DATE APPLICATION SWORN 22 year(s)			U.S. CITIZENSHIP AS OF DATE APPLICATION SWORN 59 year(s)		
LENGTH OF			10 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.

Before me, the undersigned authority, on this day personally appeared (name of candidate) Carol H Iannuzzi, who being by me here and now duly sworn, upon oath says:
 "I, (name of candidate) Carol H Iannuzzi, being a candidate for the office of U.S. House of Representatives, swear that I will support and defend the Constitution and laws of the United States. I am a citizen of the United States eligible to hold such office under the constitution of the United States. I further swear that the foregoing statements included in my application are in all things true and correct."

X Carol H Iannuzzi

Sworn to and subscribed before me this the 9th day of November, 2019, by Carol H Iannuzzi
 Signature of Officer Administering Oath: _____
 Title of Officer Administering Oath: Notary Public



TO BE COMPLETED BY CHAIR OR DESIGNEE:
 THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE PAID BY: CASH, CHECK, MONEY ORDER, CASHIERS CHECK, OR PETITION IN LIEU OF A FILING FEE.

This document and \$ 750 filing fee or a nominating petition of _____ is pages received.
 (See Section 1.007)
 Date Received: 11/13/19 Date Accepted: 11/13/19 Signature of Chair or Designee: She May

CAROL H IANNUZZI
POD SAMUEL DAVID IANNUZZI
 712 RED OAK DR
 LEWISVILLE, TX 75067-6202
 144
 32-2/1110 TX
 7508
 Date: 11/13/19

Pay To The Order Of: Texas Democratic Party \$ 3125.00
Three Thousand One Hundred and Twenty Five and 00/100 Dollars

Bank of America
 ACH R/T 111000025
 For: Filing Fee for Primary Ballot
 1110000251 48806006323010114
Carol H Iannuzzi
 Notary Public
 Notary Seal

All fields MUST be completed UNLESS MARKED OPTIONAL.¹
 Failure to provide required information may result in rejection of application.

NOV 18 2019
 Sections 141.031, 172.021, 172.022, 172.023, 172.024, Texas Election Code
 9/2019
 2-4
 Prescribed by Secretary of State

APPLICATION FOR A PLACE ON THE Democratic PARTY GENERAL PRIMARY BALLOT FOR A FEDERAL OFFICE
 TO: State/County Chair (Democratic or Republican)

I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)

United States Representative for Congressional District 26

FULL NAME (First, Middle, Last) **PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT***
 Mateo Pruneda III Mat Pruneda

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.) **PUBLIC MAILING ADDRESS** (Address for which you receive campaign related correspondence, if available.)
 1225 Tulane Drive 1225 Tulane Drive

CITY	STATE	ZIP	CITY	STATE	ZIP
Denton	TX	76201	Denton	TX	76201

PUBLIC EMAIL ADDRESS (if available) **OCCUPATION** (Do not leave blank) **DATE OF BIRTH**
 mat@mat4texas.com Controller 07 / 22 / 1971

TELEPHONE CONTACT INFORMATION (Optional) **LENGTH OF**
 Home: _____ **CONTINUOUS RESIDENCE IN STATE AS OF** **U.S. CITIZENSHIP AS OF DATE**
 Work: _____ **DATE APPLICATION SWORN** **APPLICATION SWORN**
 Cell: (323) 620-1931 4 ___ month(s) 4 ___ 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.

Before me, the undersigned authority, on this day personally appeared (name of candidate) Mateo Pruneda III who being by me here and now duly sworn, upon oath says:
 "I, (name of candidate) Mateo Pruneda III being a candidate for the office of U.S. Representative CD-26, swear that I will support and defend the Constitution and laws of the United States. I am a citizen of the United States eligible to hold such office under the constitution of the United States. I am I further swear that the foregoing statements included in my application are in all things true and correct."

Sworn to and subscribed before me this the 18 day of November 2019, by Mateo Pruneda III
 Month Year Name of Candidate

SIGNATURE OF CANDIDATE
 CHARLES B. WILKISON
 Notary Public, State of Texas
 Comm. Expires 11-08-2021
 Notary Seal ID 131344776

Signature of Officer Administering Oath _____ Title of Officer Administering Oath _____

TO BE COMPLETED BY CHAIR OR DESIGNEE:
 THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE PAID BY: CASH, CHECK, MONEY ORDER, CASHIERS CHECK, OR PETITION IN LIEU OF A FILING FEE.

This document and \$ _____ filing fee or a nominating petition of 58 is pages received.

(See Section 1.007) 11-18-19 Date Received _____ Date Accepted _____ Signature of Chair or Designee _____

APPLICATION FOR A PLACE ON THE DEMOCRATIC PARTY GENERAL PRIMARY BALLOT FOR A FEDERAL OFFICE
 TO: State/County Chair (Democratic or Republican)

I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.
 OFFICE SOUGHT (Include any place number or other distinguishing number, if any.)

UNITED STATES CONGRESS - TEXAS DISTRICT 26

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*

FULL NAME (First, Middle, Last)
NEEL LEE DURRANCE

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*

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.)

1108 W. LOCUST

1902 WILLIAMSBURG ROW

CITY <u>Denison</u>	STATE <u>TX</u>	ZIP <u>76209</u>	CITY <u>Denison</u>	STATE <u>TX</u>	ZIP <u>76201</u>
PUBLIC EMAIL ADDRESS (if available) <u>DENISONKANSFISHINGGUIDE.COM</u>			OCCUPATION (Do not leave blank) <u>ATTORNEY</u>		
TELEPHONE CONTACT INFORMATION (Optional) Home: Work: <u>(940) 898-1975</u> Cell:			DATE OF BIRTH <u>09/15/1956</u>		

TELEPHONE CONTACT INFORMATION (Optional) Home: Work: <u>(940) 898-1975</u> Cell:	CONTINUOUS RESIDENCE IN STATE AS OF DATE APPLICATION SWORN <u>30</u> year(s)	U.S. CITIZENSHIP AS OF DATE APPLICATION SWORN <u>52</u> year(s)
	<u>11</u> month(s)	<u>0</u> 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.

Before me, the undersigned authority, on this day personally appeared (name of candidate) NEEL L. DURRANCE who being by me here and now duly sworn, upon oath says:
 "I, (name of candidate) NEEL L. DURRANCE, being a candidate for the office of U.S. CONGRESS - DIST. 26, swear that I will support and defend the Constitution and laws of the United States. I am a citizen of the United States eligible to hold such office under the constitution and laws of the United States. I further swear that the foregoing statements included in my application are in all things true and correct."

SIGNATURE OF CANDIDATE


Sworn to and subscribed before me this the 5 day of Dec 2019, by Neel Durrance Name of Candidate
 Signature of Officer Administering Oath? Tommy Glen Maxey Notary Public, State of Texas
 TO BE COMPLETED BY CHAIR OR DESIGNEE: Title of Officer Administering Oath
 THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE PAID BY: CASH, CHECK, MONEY ORDER, CASHIERS CHECK, OR PETITION IN LIEU OF A FILING FEE. Notary ID 764561-2

This document and \$ 3125 filing fee or a nominating petition of _____ is pages received.

(See Section 1.007)
 Date Received 12/5/19 Date Accepted 12/5/19 Signature of Chair or Designee Neel M. Durrance

NEEL LEE DURRANCE
 1902 WILLIAMSBURG ROW
 DENTON, TX 76209
 DATE 11-5-19 2023

PAY TO THE ORDER OF Texas Democratic Party
NEEL LEE DURRANCE
 CREDIT UNION - OFFICE - WILLIAMSBURG - TEXAS
 DOLLARS \$ 3,125.00
 DATE 11-5-19 



MEMO Texas Pric
 3119807251
 2000535559
 2023