

OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TX



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

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED OPTIONAL

APPLICATION FOR A PLACE ON THE City Council GENERAL ELECTION BALLOT  
TO: City Secretary/Secretary of Board

I 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 number or other distinguishing number, if any.)  
City Council District 9

INDICATE TERM  
 FULL  
 UNEXPIRED

FULL NAME (First, Middle, Last) Sabrina Nicole Renteria  
PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT<sup>1</sup> Sabrina Renteria

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.)  
4949 Vega Ct W

PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)  
1818 E Daggett Ave

CITY STATE ZIP CITY STATE ZIP  
Fort Worth TX 76133 Fort Worth TX 76104

PUBLIC EMAIL ADDRESS (If available) Sabrinarenteriaforftw@gmail.com  
OCCUPATION (Do not leave blank) Event Planner  
DATE OF BIRTH [REDACTED]  
VOTER REGISTRATION VOID NUMBER (Optional)<sup>2</sup>

TELEPHONE CONTACT INFORMATION (Optional)  
Home:  
Work:  
Cell: 682-234-9621

LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN  
IN STATE 37 year (s)  
IN TERRITORY FROM WHICH THE OFFICE SOUGHT IS ELECTED<sup>3</sup> 6 year (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 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) Sabrina Renteria, who being by me here and now duly sworn, upon oath says:

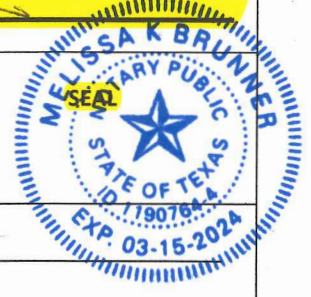
"I, (name) Sabrina Renteria of Tarrant County, Texas, being a candidate for the office of City Council District 9, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the 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 [Signature]  
SIGNATURE OF CANDIDATE

Sworn to and subscribed before me at City Hall this the 4<sup>th</sup> day of Feb, 2021

[Signature] [Signature]  
Signature of Officer Administering Oath Title of Officer Administering Oath

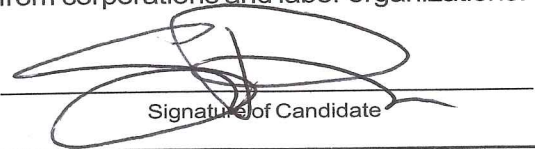


TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD:  
(See Section 1.007)  
12/20/2021 2/4/2021  
Date Received Signature of Secretary

Voter Registration Status Verified

**APPOINTMENT OF A CAMPAIGN TREASURER  
BY A CANDIDATE**

**FORM CTA  
PG 1**

See CTA Instruction Guide for detailed instructions.						1 Total pages filed: <b>2</b>	
2 CANDIDATE NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST	SUFFIX	Filer ID #	Date Received		
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Hand-delivered to Postmark	
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #	Amount \$	Date Processed	
5 OFFICE HELD (if any)							Date Imaged
6 OFFICE SOUGHT (if known)	City of Fort Worth Council District 9						
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p> Signature of Candidate</p> <p><b>1/27/2021</b> Date Signed</p>						

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**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

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 \$930 in political contributions  
or make more than \$930 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.

2021

Year of election(s) or election cycle to  
which declaration applies



Signature of Candidate

**This appointment 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](mailto: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>