ALL INFORMATION IS REQUIRED TO BE PRO					<b>.</b>			
APPLICATION FOR A PLACE ON THE 2021 CITY OF MCALLEN MAYOR 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.)  INDICATE TERM								
MAYOR				FULL				
LJUNEXPIRED								
FULL NAME (First, Middle, Last) SHAHID RASHID				PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT' Shahid 'Doctor' Rashid				
				l				
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.)			PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)					
112 CANARY AVENUE			801 E. NOLANA, SUITE 7					
CITY	STATE	ZIP	CITY	/		STATE	ZIP	
MCALLEN	ΤX	78504	McA	LLEN		TX.	78504	
PUBLIC EMAIL ADDRESS (If available)	OCCUPA	ATION (Do not lea	ave blank)	DATE OF BIRTH		VOTER REGIS	STRATION VUID	
doctorrashid 4mayor@gmail.com PHYSICIAN								
TELEPHONE CONTACT INFORMATION (Optional)  LENGTH OF CONTINUOUS RESIDENCE AS OF DATE APPLICATION SWORN  IN STATE  IN TERRITORY FROM WHICH THE								
Tionie.			HA 2141E		OFFICE SOUGHT IS ELECTED <sup>3</sup>			
Work:			. <u>22</u> year (s)		<u>21</u> year (s)			
Cell:			/ month(s)		5 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 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) SHAHID RASHID , who being by me								
here and now duly sworn, upon oath says:								
"I, (name) SHAHID RASHID of HIDALGO County, Texas, being a								
candidate for the office of MAYOR, CITY or MCALLEN, 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 cornect."								
X								
Sworn to and subscribed before me at the first that the subscribed before me at the su								
City of Mealler								
Signature of Officer Administering Oath <sup>4</sup> Title of Officer Administering Oath								
TO BE COMPLETED BY CITY SECRETARY OR SECRETARY OF BOARD: (See Section 1.007)  4 2/m 2/1/2021								
Date Received Signature of Secretary								
Voter Registration Status Verified								