

All information is required to be provided unless indicated as optional (Se requiere toda la información, a menos que haya alguna indicación de lo contrario)

APPLICATION FOR A PLACE ON THE CITY OF SAN MARCOS (GENERAL/SPECIAL) ELECTION BALLOT
 (APLICACION PARA UN LUGAR EN LA BOLETA DE LA CIUDAD DE _____ ELECCION (GENERAL/ESPECIAL))

TO: City Secretary
 (A: Secretario(a) de la Ciudad)

I request that my name be placed on the above-named official ballot as a candidate for the office indicated below
 (Solicito que mi nombre esté puesto en la arriba nombrada boleta como candidato para puesto oficial indicado abajo.)

OFFICE SOUGHT (PUESTO OFICIAL SOLICITADO)
 Include any place number or other distinguishing number, if any
 (Incluya cualquier número de lugar u otro número que hace el puesto oficial diferente a otros, si hay alguno)
MAYOR

INDICATE FULL OR UNEXPIRED TERM
 (INDIQUE SI EL TERMINO DEL PUESTO OFICIAL ES TERMINO COMPLETO O NO COMPLETADO)
FULL

FULL NAME (First, Middle, Last)
 (NOMBRE COMPLETO) (Nombre de Pila, Segundo Nombre, Apellido)
DANIEL GUERRERO

PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT
 (ESCRIBA SU NOMBRE COMO DESEA QUE APAREZCA EN LA BOLETA)
DANIEL GUERRERO

PERMANENT RESIDENCE ADDRESS (Street address and apartment number If none, describe location of residence. Do not include P.O. Box or Rural Rt) (DIRECCION DE RESIDENCIA PERMANENTE Calle y Número de Departamento si no tiene, describa la localidad de su residencia No incluya su caja postal o ruta rural)
1402 HARPER DRIVE

MAILING ADDRESS (If different from residence address)
 (DIRECCION POSTAL (Si es diferente a su dirección de residencia))

SCANNED
 JUL 27 2010

CITY (CIUDAD) SAN MARCOS STATE (ESTADO) TX ZIP (ZONA POSTAL) 78666

OCCUPATION (Do not leave blank)
 (EMPLEO) (No lo deje en blanco)
EXECUTIVE DIRECTOR

DATE OF BIRTH (FECHA DE NACIMIENTO)
2/15/77

VOTER REGISTRATION VOID NUMBER (if applicable)
 (NUM. DE VUID DE VOTANTE (si applicable))

TELEPHONE NUMBER (Include area code) (Optional)
 (NUMERO DE TELEFONO-Incluya el código de la área) (Facultativo)
 OFFICE 512 398-6930
 HOME: 512 265-1931

Length of Continuous Residence as of Date Application Sworn
 (Tiempo en que ha Residido en un Solo Lugar en la Fecha en que Prestó Juramento Sobre la Solicitud)

IN STATE (EN EL ESTADO)	IN CITY (EN EL CIUDAD)	IN DISTRICT OR PRECINCT (EN EL DISTRITO O PRECINTO)
<u>33</u> yr(s) <u>5</u> mos (años) (mes(es))	<u>33</u> yr(s) <u>5</u> mos (años) (mes(es))	____ yr(s) ____ mos (años) (mes(es))

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 Para poder incluir un apodo como parte de su nombre completo el la papeleta. Ud deberá firmar la siguiente constancia Además, juro que se me ha conocido por este apodo por mas de tres años Además, juro que el apodo no es un lema político ni una indicación de mis creencias o afiliaciones políticas, económicas, sociales, o religiosas

Before me, the undersigned authority, on this day personally appeared (name) DANIEL GUERRERO, who being by me here and now duly sworn, upon oath says "I, (name) DANIEL GUERRERO, of HAYS County, Texas, being a candidate for the office of MAYOR, 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 "

(Ante mí, la autoridad, suscrita apareció en persona _____, quien habiendo aquí y ahora prestado juramento debido, bajo juramento dice "Yo, _____ del condado de _____, Texas, siendo candidato para el puesto oficial de _____ solemnemente juro que apoyaré y defenderé la Constitución y las leyes de los Estados Unidos y del Estado de Texas Soy ciudadano de los Estados Unidos elegible para ocupar tal puesto oficial bajo la Constitución y las leyes de este Estado No me han determinado por un juicio final de una corte de la legalización de un testamento, ser totalmente incapacitado mentalmente o parcialmente incapacitado sin el derecho de votar, ni he sido probado culpable finalmente de una felonía por la cual no he sido perdonado o por la cual no se me han restituido enteramente mis derechos de ciudadanía por medio de otra acción oficial Yo tengo conocimiento de la ley sobre el nepotismo según el capítulo 573 de Código Gobierno

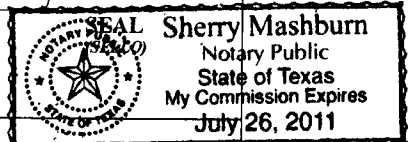
Ademas juro que las precedents declaraciones que incluyo en mi solicitud son verdaderas y están correctas en todos sentidos "

[Signature]
 SIGNATURE OF CANDIDATE (FIRMA DEL CANDIDATO)

Sworn to and subscribed before me at 8:03 am, this the 26th day of JULY, 2010
 (Jurado y suscrito ante mí en _____ este día _____ de _____ de _____, 2010)

[Signature]
 Signature of Officer administering oath
 (Firma del oficial administrando el juramento)

CITY CLERK
 Title of Officer administering oath
 (título del oficial administrando el juramento)



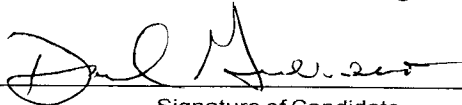
TO BE COMPLETED BY CITY SECRETARY:
 (See Section 1 007)

7/26/10 [Signature]
 Date Received Signature of City Secretary

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA

PG 1

See CTA Instruction Guide for detailed instructions.		1	Total pages filed:							
2	CANDIDATE NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Acct # Date Received City Clerk JUL 26 2010 City of San Marcos					
		NICKNAME	LAST	SUFFIX						
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #.	CITY,		STATE,	ZIP CODE			
4	CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION		HD/PM				
5	OFFICE HELD (if any)					Date Processed				
6	OFFICE SOUGHT (if known)	MAYOR				Date Imaged				
7	CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX			
		MR.	FRANK T.		ARREDO	ARREDO	ND			
8	CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE),					APT / SUITE #.	CITY,	STATE,	ZIP CODE
		904						San Marcos TX		78666
9	CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION				
		(512)		465-2350						
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.								
		 Signature of Candidate					7-26-10 Date Signed			

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**City of San Marcos
City Council/Council Appointee
Annual Financial Disclosure Form**

Notes: 1. This report covers the reporting period from January 1, ⁰⁹10 to December 31, ⁰⁹10.
2. Attach information on additional pages if necessary.

Name: DANIEL GUERRERO

Residence address: 1402 HARPER DRIVE
SAN MARCOS, TX 78666

City Clerk

JUL 26 2010

Title of position held with the City: NA

City of San Marcos

Name of spouse (if applicable): _____

Names of all dependent children (if applicable): _____

Names under which you, your spouse, or any of your dependent children do business:

1. DANIEL GUERRERO

2. _____

3. _____

Note – You may use the following reporting categories to describe amounts and values:

- (1) **Category I** – At least \$100.00 but less than \$10,000.00
- (2) **Category II** – At least \$10,000.00 but less than \$20,000.00
- (3) **Category III** – At least \$20,000.00 but less than \$50,000.00
- (4) **Category IV** – At least \$50,000.00 but less than \$75,000.00
- (5) **Category V** – At least \$75,000.00 but less than \$100,000.00
- (6) **Category VI** – \$100,000.00 or more - report to nearest \$100,000.

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1. Identify each source of income amounting to more than \$100.00 received in the reporting period by you, your spouse, or any of your dependent children:

Name, address of income source	Nature of income (e.g., salary, dividends, rent, etc.)	Amount of income (by reporting category)
<u>SAN MARCOS EDUCATION FOUNDATION</u> <u>500 W HUTCHINSON SAN MARCOS TX</u> <u>78666</u>	<u>SALARY</u>	<u>III</u>
<u>NA</u>	<u>NA</u>	<u>NA</u>
<u>NA</u>	<u>NA</u>	<u>NA</u>

2. Identify each option held, owned, acquired or sold by you, your spouse, or any of your dependent children during the reporting period:

Nature of option (real estate, stock, etc.)	Amount of transaction (by reporting category)	Name, address of other parties to the transaction
<u>NA</u>	<u>NA</u>	<u>NA</u>
<u>NA</u>	<u>NA</u>	<u>NA</u>
<u>NA</u>	<u>NA</u>	<u>NA</u>

3. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children was a partner, manager, officer, member of the board of directors, proprietor or beneficiary during the reporting period:

Name, address of business or nonprofit entity or union	Position held
SAN MARCOS EDUCATION FOUNDATION 500 W HATCHISON SAN MARCOS TX 78866	EXECUTIVE DIRECTOR
NA	NA
NA	NA

4. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children had an ownership interest with a fair market value of more than \$100.00 at any time during the reporting period:

Name, address of business or nonprofit entity or union	Description of ownership interest (e.g., owner, partner, stockholder)	Value of ownership interest (by reporting category)	Number of shares held/ number of shares issued (if applicable)	Net gain or loss from sale of stock (by reporting category)
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

5. Identify any real property in the City or ETJ in which you, your spouse, or any of your dependent children had an interest as owner, beneficial owner (holder of a mortgage), business owner (partner in a partnership; or board member, officer or owner of more than 5% of stock of a corporation), or a leaseholder:

Address or legal description	Name, address of owner(s) (if other than you, your spouse or children)	Fair market value (by reporting category) and present use	For leased property, annual rental amount (by reporting category)	Homestead exemption on this property?
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA
NA	NA	NA	NA	NA

6. Identify persons, business entities or guarantors to whom you, your spouse, or any of your dependent children owed a debt of more than \$100.00 during the reporting period (not including debts owed to persons related within the second degree of consanguinity or affinity, or loans to a political campaign which were reported as required by law):

Name, address of person, business entity or guarantor to which debt was owed	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
ST. EDWARD'S UNIVERSITY 3001 S CONGRESS AUSTIN TX 78704	III	I
NA	NA	NA
GOVERNMENT EMPLOYEES FCU PO BOX 81535 AUSTIN TX 78708	II	I

7. Provided this information is not privileged by law, identify persons, business entities or guarantors who owed you, your spouse, or any of your dependent children a debt of more than \$100.00 during the reporting period (not including debts owed by persons related within the second degree of consanguinity or affinity):

Name, address of person, business entity or guarantor that owed the debt	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
NA	NA	NA
NA	NA	NA
NA	NA	NA

8. Identify the source of each gift or accumulation of gifts from one source of more than \$100.00 in value received during the reporting period by you, your spouse, or any of your dependent children, or received by another person for the use and benefit of you, your spouse, or any of your dependent children (not including 1) a gift received from a relative if given because of kinship, or 2) a gift received by will, by intestate succession or as distribution from an inter vivos or testamentary trust established by a spouse or ancestor):

Name, address of source of gift(s)	Description of gift(s)	Amount or value of gift(s) (by reporting category)
NA	NA	NA
NA	NA	NA
NA	NA	NA

9. Provided this information is not privileged by law, if you were the owner of 5% or more of any business entity during the reporting period, list all customers from whom the entity received at least ten per cent of its gross income during the reporting period:

Name, address of customer
NA
NA
NA

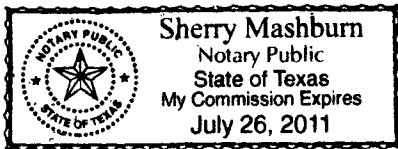
10. Identify any financial interest in any franchisee of the City held during the reporting period by you, your spouse, or any of your dependent children (note: franchise holders are A)Time Warner Cable, B) Pedernales Electric Cooperative, C) Bluebonnet Electric Cooperative, and D) CenterPoint Energy Entex):

Name of franchise holder	Description of financial interest held (stock, mortgage, note etc.)	Value of financial interest (by reporting category)
NA	NA	NA
NA	NA	NA
NA	NA	NA

11. Identify any transaction during the reporting period by you, your spouse, or any of your dependent children with any holder of any franchise issued by the City, other than as a customer or patron:

Name of franchise holder	Description of transaction	Value of transaction (by reporting category)
NA	NA	NA
NA	NA	NA
NA	NA	NA

AFFIDAVITI swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



Daniel Guerrero
Signature of Local Government Officer/Appointed Official

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said DANIEL GUERRERO, this the 26th day of JULY, 20 10, to certify which, witness my hand and seal of office.

Sherry Mashburn
Signature of officer administering oath

SHERRY MASHBURN
Printed name of officer administering oath

CITY CLERK
Title of officer administering oath