



**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

JOSE F BRAVO  
602 S WESTGATE  
WESLACO TX 78596

VID: 1054830981

Idnumber: 397751

Notice #: N2443959



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-41 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rej\_2s  
150721

Prescribed by the Secretary of State 000025.95

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only  
PCT Cert Num

EDR

Last Name  
(Apellido usual)

**BRAVO**

First Name (NOT HUSBAND)  
(Su nombre de pila) (Siendo mujer)

**Jose**

Middle Name (If any)  
(Segundo Nombre) (si tiene)

**F**

Former Name  
(Nombre anterior)

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal. A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

**500 W. 11th Weslaco TX 78596**

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)

**Same as above**

Gender (Optional)

(Sex) (Optativo)

Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year  
(Fecha de Nacimiento): (mes, día, año)

City, County, and State of Former Residence  
(Ciudad, Condado, Estado de su residencia anterior)

Social Security No. (Optional) (Número de Seguro Social) (optativo)

TX DRIVER'S LICENSE No. or PERSONAL ID No. (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública) (Optativo)

Check appropriate box: I am a United States Citizen  Yes (Si)  No (No)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es un delito sancionable por ley federal y estatal.)

Telephone Number (Optional) (Número telefónico) (optativo)

**956-962-5108**

I affirm that I (Declaro que soy)

- am a resident of this county; (residente del condado)
- have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
- have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial.)

**RECEIVED MAR 29 1999**

**3 122 99**  
Date (fecha)

**X** *[Signature]*

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)



# STATEMENT OF RESIDENCE (CONSTANCIA DE DOMICILIO PERMANENTE)

For persons whose residence address does not match voter registration address.

(Para personas cuya dirección no coincida con la que aparece en la lista oficial de votantes inscritos.)

Important Instructions on Back. (Vea las instrucciones importantes al Cado reverso)

Last Name (Apellido usual) BRAVO	First Name (NOT HUSBAND'S) (Si nombre de pila) (Siendo mujer: no el del esposo) JOE	Middle Name (if any) (Segundo nombre) (si tiene) J	Former Name (Nombre anterior)
--	---	--	----------------------------------

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Domicilio: calle y número, número de apartamento, ciudad, estado, y código postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

602 S Westgate Westlaco TX 78596

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. Please complete even if mailing address has not changed. (Dirección postal, ciudad, estado y código postal si es imposible, entregarle correspondencia a domicilio. Aunque no haya cambiado de dirección postal, por favor complete esta constancia.)

Gender (Optional)  
(Sexo) (Opcional)

Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year  
(Mes, día, año)

Certificate No. (optional)  
(Núm. del certificado (opcional))

397751

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)  
(Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas.)

I affirm that I still reside within: (Print below the county and political subdivision conducting the election) (Declaro que sigo residiendo en (imprima el nombre del condado / subdivisión política donde se celebrará la elección).)

The information provided is true. (Declaro que estos datos que proporciono son ciertos.)

Signature of Voter  
(Firma del votante)

Check if you do not have a driver's license, or personal identification number (Cheque aquí si no tiene número de su licencia tejana de manejar o de cédula de identidad expedida por el Departamento de Seguridad Pública de Tejas.)

If no TX Driver's License, give last 4 digits of your Social Security Number (Si no tiene licencia, de manejar o identificación personal se requiere los números de su número social.)

Check if you do not have a Social Security Number (Cheque aquí si no tiene número social.)

REC'D APR 04 2008

Prescribed by Secretary of State 9/05 sec.63.0011 BPM 3-1-05

# VOTER REGISTRATION APPLICATION

(SOLICITUD DE INSCRIPCION DE VOTANTE)

Additional Information  
**CHAM**

For Official Use Only  
PCT **113** Cert. Num. **397751** EDR

<b>Last Name</b> (Apellido usual) <b>BRAVO</b>	<b>First Name (NOT HUSBAND'S)</b> (Su nombre de pila) (Siendo mujer: no el del esposo) <b>Jose</b>	<b>Middle/Maiden Name (If any)</b> (Segundo Nombre/Apellido de Soltera (si tiene)) <b>F. H. 1054830981</b>	<b>Former Name</b> (Nombre anterior)
--	--	--	---

**Residence Address: Street Address and Apartment Number, City, State, and ZIP.** (Do not include P.O. Box or Rural Rt.)  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)  
**2009 Chula Vista Westaco TX 78596**

<b>Mailing Address, City, State and ZIP:</b> If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.) <b>Same as above</b>	<b>Gender (Optional)</b> (Sexo) (Optativo) <input checked="" type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
--	--

<b>Date of Birth:</b> month, day, year (Fecha de Nacimiento) (month, day, year) [Redacted]	<b>City, County, and State of Former Residence</b> (Ciudad, Condado, Estado de su residencia anterior) <b>Westaco, Hidalgo, TEXAS</b>	<b>Social Security No. (Optional)</b> Número de Seguro Social (optativo) [Redacted]
--	---	--

**Check appropriate box: I AM A UNITED STATES CITIZEN**  Yes  No  
(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos) (Si) (No)

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.**  
(Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

**TX DRIVER'S LICENSE NO. or PERSONAL I.D. NO.** (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad)  
[Redacted]

**Telephone Number (Optional)** Número telefónico (optativo)  
**956-947-2329**

**I affirm that I** (Declaro que soy)

- am a resident of this county;** (residente del condado)
- have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code;** and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
- have not been declared mentally incompetent by final judgment of a court of law.** (no se me ha declarado mentalmente incapacitado por orden judicial.)

**Check one** (Marque el cuadro)

New (Nuevo)  Change (Cambiar)  Replacement (Reemplazar)

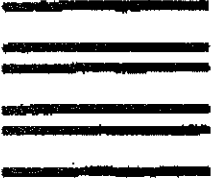
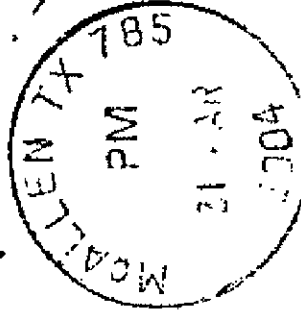
**Date** (fecha)      /      /     

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant, if Signed by Witness and Date.** (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)

*[Handwritten Signature]*

**RECEIVED APR 15 2004**

For Assistance Call  
Secretary of State's  
Office Toll Free:  
Si Necesita Ayuda  
Llame Gratis Al:  
1-800-252-(VOTE) 8683



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE

(CITY) (ZIP CODE)

Edinburg, TX 78540-0659



# VOTER REGISTRATION APPLICATION

## (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only

PCT

Cert. Num

EDR

Last Name (Apellido usual) <b>BRAVO</b>	First Name (NOT HUSBAND) (Su nombre de pila) (Siendo mujer) <b>Jose</b>	Middle Name (If any) (Segundo Nombre) (si tiene) <b>A</b>	Former Name (Nombre anterior)
---	---	---	----------------------------------

**Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)**  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

**500 W. 11th Weslaco TX 78596**

**Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)**

**Same as above**

**Gender (Optional)**  
(Sexo) (Opativo)  
 Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year (Fecha de nacimiento) (Mes, día, año)	City, County, and State of Former Residence (Ciudad, Condado, Estado de su residencia anterior)	Social Security No. (Optional) (Número de Seguro Social) (optativo)
--	--	---

**Check appropriate box: I am a United States Citizen**  Yes (Si)  No (No)

(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos)

**Texas Driver License or Texas Personal ID No. (Issued by TX Dept. of Public Safety) (Optional)** (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública) (Opativo)

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.** (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionada por la ley federal y estatal.)

**Telephone Number (Optional)** (Número telefónico) (optativo)

**956-962-5108**

- I affirm that I** (Declaro que soy)
- **am a resident of this county;** (residente del condado)
  - **have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and** (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
  - **have not been declared mentally incompetent by final judgment of a court of law.** (no se me ha declarado mentalmente incapacitado por orden judicial.)

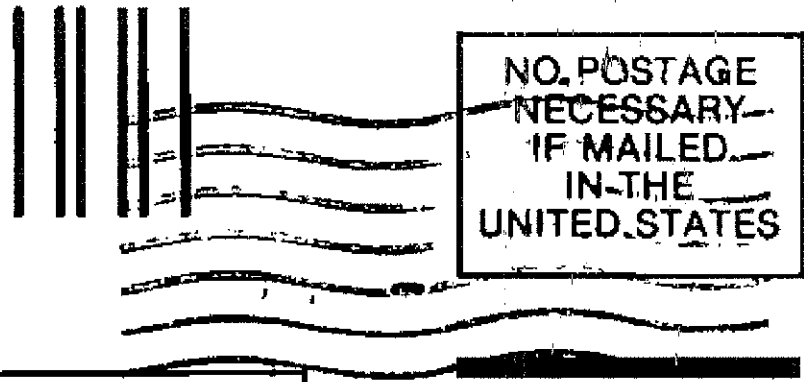
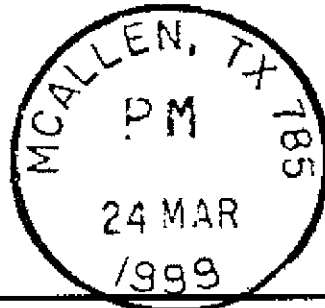
**X** 

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.** (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)

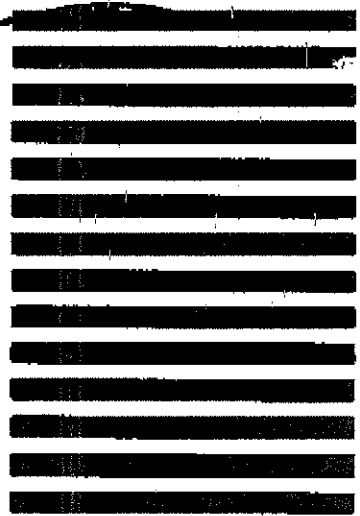
**3 122, 99**  
Date (fecha)

**RECEIVED MAR 29 1999**

For Assistance Call  
*Si Necesita Asistencia*  
Secretary of State's  
*Llame Gratis Al:*  
Office Toll Free:  
1-800-252-(VOTE) 8683



**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX



POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE

(CITY) Edinburg, TX (ZIP CODE) 78539





# STATEMENT OF RESIDENCE (CONSTANCIA DE DOMICILIO PERMANENTE)

For persons whose residence address does not match voter registration address.

(Para personas cuya dirección no coincida con la que aparece en la lista oficial de votantes inscritos.)

Important Instructions on Back. (Vea las instrucciones importantes al Cado reverso)

<b>Last Name</b> <small>(Apellido usual)</small> BRAVO	<b>First Name (NOT HUSBAND'S)</b> <small>(Sin nombre de pila) (Siendo mujer: no el del esposo)</small> JOE	<b>Middle Name (If any)</b> <small>(Segundo nombre) (si tiene)</small> F	<b>Former Name</b> <small>(Nombre anterior)</small>
--	--	--	--

**Residence Address: Street Address and Apartment Number, City, State, and ZIP.** If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Domicilio: calle y número, número de apartamento, ciudad, estado, y código postal. A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

602 S Westgate Westlaco TX 78596

<b>Mailing Address, City, State and ZIP:</b> If mail cannot be delivered to your residence address. Please complete even if mailing address has not changed. <small>(Dirección postal, ciudad, estado y código postal si es imposible, entregarle correspondencia a domicilio. Aunque no haya cambiado de dirección postal, por favor complete esta constancia.)</small>	<b>Gender (Optional)</b> <small>(Sexo) (Opcional)</small> <input checked="" type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
--	---

#1054830981

<b>Date of Birth: month, day, year</b> <small>(Mes, día, año)</small> <div style="background-color: black; width: 100px; height: 20px;"></div>	<b>Certificate No. (optional)</b> <small>(Núm. del certificado (opcional))</small> 397751
--	---

**I affirm that I still reside within:** (Print below the county and political subdivision conducting the election) (Declaro que sigo residiendo en (imprima el nombre del condado y subdivisión política donde se celebrará la elección).)

Hidalgo

The information provided is true. (Declaro que estas datos que proporciono son ciertos.)

[Signature]

**Signature of Voter**  
(Firma del votante)

**TX Driver's License or Personal I.D. No.** (Issued by the Department of Public Safety)  
(Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Texas.)

Check if you do not have a driver's license, or personal identification number (Cheque aquí si no tiene número de su licencia tejana de manejar o de cédula de identidad expedida por el Departamento de Seguridad Pública de Texas.)

**If no TX Driver's License, give last 4 digits of your Social Security Number**  
(Si no tiene licencia de manejar o identificación personal se requiere los números de su número social.)

Check if you do not have a Social Security Number (Cheque aquí si no tiene número social.)

REC'D APR 04 2008

Prescribed by Secretary of State 9/05 sec.63.0011 BPM 3-1-05

## **SI VOTA POR CORREO:**

*Ya que su solicitud de una boleta electoral postal contiene un domicilio o dirección permanente distinto al domicilio bajo cual está inscrito a votar, o ya que la Oficina del Registro Electoral tiene información que indica que usted se ha mudado; será necesario que complete la Constancia de domicilio permanente aquí incluida, y que la devuelva con su boleta electoral completada (o sea, en la que ha marcado su voto) en el sobre proporcionado.*

*Si no nos envía la Constancia de domicilio permanente, su voto no se incluirá en el conteo final.*

*Antes de incluir sus votos en el conteo final, se verificará que su nuevo domicilio permanente aún queda dentro de la jurisdicción apropiada. Siempre y cuando no califique bajo una de las excepciones anotadas a continuación, el domicilio postal indicado en la solicitud de una boleta postal, tiene que ser el mismo que aparece en la Constancia de domicilio permanente. Estas excepciones incluyen: (1) si el solicitante estará fuera del condado y ya ha proporcionado un domicilio postal ubicado fuera del condado; (2) si el votante tiene un mínimo de 65 años de edad; si es minusválido y se ha proporcionado una dirección que corresponde a un hospital, centro de cuidados de enfermería, centro de cuidados médicos a largo plazo, comunidad de jubilados u hogar de un familiar inmediato o (3) si está encarcelado y ya ha proporcionado el domicilio de la cárcel en que está encarcelado o el de un familiar inmediato. Si no califica bajo cualquiera de estas excepciones, y si el domicilio postal indicado en esta Constancia de domicilio permanente no concuerda con el domicilio indicado en su solicitud de una boleta postal, sus votos no se incluirán en el conteo final. Esta Constancia será enviada a las Oficinas del Registro Electoral para que las actas de inscripción electoral sean modificadas y Ud. recibirá una cédula electoral nueva que indicará el número de su nuevo recinto electoral, si esto fuera a cambiarse, y su nuevo domicilio permanente.*

*Es necesario que firme la tarjeta*

*Para mayor información o para aclarar cualquier duda, por favor llame al \_\_\_\_\_*



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1054830981

JOSE F BRAVO  
602 S WESTGATE  
WESLACO TX 78596

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 113 DATE OF RECORD: 12/18/2014

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
11/05/2013	2013 CONSTITUTIONAL ELECTION		E
11/06/2012	2012 GENERAL ELECTION		E
06/01/2012	2012 PARTY AND RUNOFF HISTORY	D	E
05/29/2012	2012 Primary Election	D	E
05/14/2011	City and School Elections		P
11/02/2010	GENERAL ELECTION		E
03/02/2010	Primary Election	D	E
05/09/2009	WESLACO CITY GENERAL ELECTION		E
04/08/2008	RUNOFF ELECTION	D	E

SIGNED:



**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

JOSE ANGEL CANTU  
PO BOX 485  
PENITAS TX 78576

VUID: 1055255613

Idnumber: 519020

Notice #: N2443967



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-31 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_141\_2s  
150721

Last Name <b>Cantu</b>	First Name <b>JOSÉ</b>	Middle Name (If any) <b>Angel</b>	Former Name <b>SIRO 20</b>
---------------------------	---------------------------	--------------------------------------	-------------------------------

**Residence Address:** Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
**Tom Gill Opal St Peritas TX 78576**

**Mailing Address:** Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address.  
**Po Box 485 Peritas TX 78576**

**Date of Birth:** month, day, year  
[REDACTED]

**Gender (Optional)**  
 Male  Female

**TX Driver's License No. or Personal I.D. No.**  
 (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number  
 [REDACTED]

Check if you do not have a social security, driver's license, or personal identification number

**Telephone Number, Include Area Code (Optional)**  
**956-510-67-09**

**City and County of Former Residence In Texas**  
**Peritas, Hidalgo**

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

REC'D FEB 05 2006

**1/12/06**  
Date

**X** *[Signature]*  
 Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.



# Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

## Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by election day.
- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. Please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

Grad 2-05

For Official Use Only

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

## Complete These Questions Before Proceeding

Check one  New  Change  Replacement

Are you a United States Citizen?  Yes  No

Will you be 18 years of age on or before election day?  Yes  No

If you checked 'no' in response to either of these questions, do not complete this form.

Have you ever voted in this county for a federal office?  Yes  No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Fold on line and seal before mailing.

Last Name: Conto First Name: José Middle Name (If any): Angel Former Name: 5190 20

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
Tam Gill Apt St Penitas Tx 78576

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address.  
Po Box 485 Penitas Tx 78576

Date of Birth: month, day, year Gender (Optional)  
 Male  Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number

Check if you do not have a social security, driver's license, or personal identification number

Telephone Number, Include Area Code (Optional)  
956-510-6709

City and County of Former Residence In Texas  
Penitas, Hidalgo

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

REC'D FEB 05 2006

1 11 06  
Date

X José A Conto

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance Call  
Office of the Secretary of State  
Toll Free:  
*Si necesita asistencia  
llame gratis al:*  
1-800-252-VOTE(8683)  
www.sos.state.tx.us



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX



POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE  
(CITY) (ZIP CODE)

Edinburg, TX 78539

**General Information**

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification, then give the last four digits of your social security number. If you do not have either of these identification numbers, then you must indicate by checking the box on the application side.

**Identification Requirement**

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

**Este formulario está disponible en Español. Favor de llamar sin cargo a la oficina del Secretario de Estado al 1-800-252-8683 para conseguir una version en Español.**



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1055255613

JOSE ANGEL CANTU  
1202 OPAL  
PENITAS TX 78576

BIRTHDATE



CURRENT PRECINCT: 050

DATE OF RECORD: 09/09/2013

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

MANGARTO CORTEZ  
PO BOX 417  
LA VILLA TX 78562

VOID: 1143057087

Idnumber: 10006567

Notice #: N2443964



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANÍA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-22 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rej\_2a  
150721

# Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

## Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by election day.
- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State  
 For Official Use Only  
 VSR17.06E.p65

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

## Complete These Questions Before Proceeding

- Check one  New  Change  Replacement
- Are you a United States Citizen?  Yes  No
- Will you be 18 years of age on or before election day?  Yes  No
- If you checked 'no' in response to either of the above, do not complete this form.
- Are you interested in serving as an election worker?  Yes  No
- Continue below to complete application.

Last Name **Conte** First Name **Margaret**

Middle Name (if any) **1143057087** Former Name

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) **438 W. Sandra Leiva Ave #4A Edcson TX**

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address. **P.O. Box 417 La Villa Tx 78562**

Date of Birth: month, day, year **[REDACTED]** Gender (Optional)  Male  Female

TX Driver's License No. or Personal I.D. No. **[REDACTED]**

- Check if you do not have a TX Driver's License, or Personal Identification Number
- If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I **APR 12 2007**

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

Check if you do not have a Social Security Number

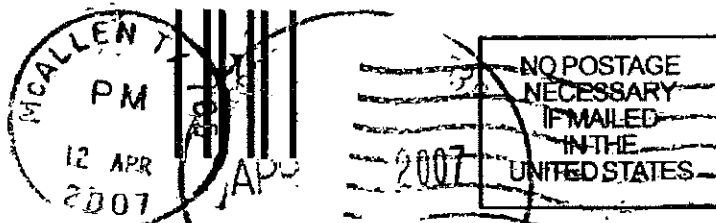
Telephone Number, Include Area Code **3-11-62** (Optional)

**X M Margaret Conte** Date **4/12/07**

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant If Signed by Witness and Date.

Fold on line and seal before mailing

For Assistance  
Call your local Voter Registrar or  
Office of the Secretary of State  
Toll Free: *Si necesita asistencia*  
*llame gratis al:*  
1-800-252-VOTE(8683)  
www.sos.state.tx.us



**BUSINESS REPLY MAIL** PS  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE  
(CITY)

(ZIP CODE)

**EDINBURG**, TX **78540**



Fold on line and seal before mailing

**General Information**

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

**Identification Requirement**

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

**Este formulario está disponible en Español. Favor de llamar sin cargo a la oficina del Secretario de Estado al 1-800-252-8683 para conseguir una version en Español.**



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1143057087

MANGARTO CORTEZ  
408 W SANTA ROSA AVE  
EDCOUCH TX 78538

BIRTHDATE:



CURRENT PRECINCT: 016

DATE OF RECORD: 07/03/2008

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

April 22, 2016

ASELA GAITAN  
1001 TULIP DR  
PHARR TX 78577

VOID: 1052978627

Idnumber: 452500

Notice #: N2438427



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12138-134 NCTZ

n. rej. 2s  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

Prescribed by  
Secretary of State  
17.97 BPM1.1-97

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

Additional Information

For Official Use Only  
PC# Cert. Num.

101 452500  
V# 1052978627

Last Name  
(Apellido usual)  
GAITAN.

First Name (NOT HUSBAND'S)  
(Su nombre de pila) (Si es mujer: no el del esposo)  
SETH A SELA

Middle/Maiden Name (If any)  
(Segundo Nombre/Apellido de Soltera  
(si tiene))

Former Name  
(Nombre anterior)

Residence Address: Street Address and Apartment Number, City, State and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

1001 TULIP DR PHARR, TX 78577

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)

1001 TULIP DR PHARR TX 78577

Gender (Optional)  
(Sexo) (Opcativo)  
 Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year  
[Redacted]

City, County, and State of Former Residence  
(Ciudad, Condado, Estado de su residencia anterior)  
TX (same place)

[Redacted] Social (Opcativo)

Check appropriate box: I AM A UNITED STATES CITIZEN Yes  No   
(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos) (Si) (No)

Dept. of Public Safety (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas) (opcativo)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.  
(Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa, es una infracción sancionable por ley federal y estatal.)

Telephone Number (Optional) (Número telefónico) (opcativo)  
279-1958

- I affirm that I (Dedaro que soy)
- am a resident of this county; (residente del condado)
  - have not been finally convicted of a felony or a felon I am eligible for registration under section 13.001. Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
  - have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial)

Mark one (Marque el cuadro)  
 New (Nuevo)  Change (Cambiar)  Replacement (Reemplazar)

RECEIVED MAR 07 2002

X  
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)  
Date (fecha)  
3/3/02

# VOTER REGISTRATION APPLICATION

(SOLICITUD DE INSCRIPCION DE VOTANTE)

Additional Information

For Official Use Only  
PC# 01  
Cert. Num. 52500  
EDR

Last Name (Apellido usual) <b>GAITAN.</b>	First Name (NOT HUSBAND'S) (Su nombre de pila) (Siendo mujer: no el del esposo) <b>SETH ASELA</b>	Middle/Maiden Name (if any) (Segundo Nombre/Apellido de Soltera (si tiene)) <b>V#1052978627</b>	Former Name (Nombre anterior)
---	---	---	----------------------------------

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describe la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

**1001 TULIP DR PHARR, TX 78577**

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio)

**1001 TULIP DR PHARR TX 78577**

Gender (Optional)  
(Sexo) (Opcativo)  
 Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year  
[Redacted]

City, County, and State of Former Residence  
(Ciudad, Condado, Estado de su residencia anterior)  
**TX (same place)**

Social Security No. (Optional) (Número de Seguro Social) (opcativo)  
[Redacted]

Check appropriate box: I AM A UNITED STATES CITIZEN  Yes (Si)  No (No)  
(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos)

TX DRIVER LICENSE NO. OR PERSONAL ID NO. (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Texas) (opcativo)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.  
(Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa, y es una infracción sancionable por ley federal y estatal.)

Telephone Number (Optional) (Número telefónico) (opcativo)  
**279-1958**

**RECEIVED MAR 07 2002**

I affirm that I (Declaro que soy)

- am a resident of this county; (residente del condado)
- have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
- have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial.)

New (Nuevo)  Change (Cambiar)  Replacement (Reemplazar)

**3/5/02**  
Date (fecha)

*[Signature]*  
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)

For Assistance Call  
Si Necesita Asistencia  
Secretary of State's  
Llame Gratis At:  
Office Toll Free:  
1-800-252-(VOTE) 8683

Receipt stub for Voter Registration  
to be kept by Volunteer Deputy

Asele Gaitan  
Name of Voter

1001 Tulip Dr. Pharr TX 78577  
Address of Voter

3/3/02  
Date

Asele Gaitan  
Signature of Volunteer

**B**  
File

POST

RE  
CC  
(CI





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 9th day of February, 2017

1052978627

ASELA GAITAN  
1001 TULIP DR  
PHARR TX 78577

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 061 DATE OF RECORD: 09/14/2011

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
03/04/2008	PRIMARY ELECTION	D	P
03/12/2002	2002 PRIMARY	D	P

SIGNED:



**ELECTIONS DEPARTMENT**  
County of Hidalgo

April 22, 2016

GONZALO GARCIA  
1202 JOYCE ST  
WESLACO TX 78599

VUID: 1054032099

Idnumber: 292288

Notice #: N2438425



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramon  
Hidalgo County Elections Administrator

BSAGREDO  
12138-160 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

11\_rej\_2s  
160721

# VOTER REGISTRATION APPLICATION (SOLICITUD PARA REGISTRO DE VOTANTE)

PLEASE COMPLETE ALL OF THE INFORMATION BELOW. PRINT IN INK OR TYPE.

¡POR FAVOR COMPLETE LA SIGUIENTE INFORMACION. ESCRIBA EN LETRA DE MOLDE CON TINTA O ESCRIBA A MAQUINA.

For Official Use Only  
 PCT 4922 EDR 88

Last Name (Apellido) <b>GARCIA</b>	First Name (NOT HUSBAND'S) (Nombre de Pila) (NO DEL ESPOSO) <b>GONZALO</b>	Middle Name (If any) (Segundo Nombre) (si tiene)	Maiden Name (Apellido de Soltera)
--	--	---	--------------------------------------

Sex (Sexo) <b>M</b>	Date of Birth: month, day, year (Fecha de Nacimiento)	Place of Birth: city or county, state or foreign country (Lugar de Nacimiento): (ciudad o condado), (estado o país extranjero) <b>SAMORA MICHOACAN MEXICO</b>	County and Address of Former Residence (Condado y dirección de su residencia previa)
---------------------------	--	---	---

Residence (Dirección de Residencia): Calle y Número de Departamento, Ciudad, Estado, y Zona Postal; si no tiene, describa la localidad de su residencia. (Do not include P.O. Box or Rural Rt.) (No incluya su caja postal o ruta rural.)

**V# 1054032099**

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección Postal, Ciudad, Estado y Zona Postal) (Si es imposible entregar correspondencia a su dirección.)

**1202 JOYCE ST WESLACO TX 75596**

Applicant is a United States citizen and a resident of the county and has not been finally convicted of a felony or if a felon eligible for registration under section 13.001, Election Code. I understand that giving false information to procure a voter registration is a misdemeanor. (Suplicante es ciudadano de los Estados Unidos y es residente del condado y no ha sido probado culpable finalmente de un crimen, o, si es criminal, está elegible para registrarse para votar bajo las condiciones de la sección 13.001 del Código de Elecciones. Yo entiendo que es un delito menor dar información falsa con motivo de conseguir un registro de votante.)

Social Security No. (Número de Seguro Social)*	[REDACTED]
Telephone No. (Optional) (Número de Teléfono) (Facultativo)	<b>969-2984</b>
TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional) (Número de Licencia de Conductor de Texas o Número de Identificación Personal) (Emitted por el Departamento de Seguridad Pública de Texas) (Facultativa)	[REDACTED]

Signature of Applicant or Agent or Printed Name of Applicant if Signed by Witness (Firma del Suplicante o Agente, o Nombre del Suplicante En Letra de Molde Si Fue Firmado Por Un Testigo)

*x Gonzalo Garcia*

Court of Naturalization, If Applicable  
(Corte de Naturalización, Si Aplicable)

FOR WITNESS (PARA TESTIGO):	Signature (Firma)	Printed name (Nombre en Letra de Molde)
	<i>Guadalupe Acevedo</i>	

FOR AGENT (PARA AGENTE): Application may be made by agent, who must be a qualified voter of this county or have submitted a registration application and must otherwise be eligible to vote and must be the applicant's husband, wife, father, mother, son or daughter. (La solicitud podrá estar dirigida por un agente que deberá ser un votante capacitado de este condado o que habrá presentado una solicitud para registrarse para votar, y de otro modo deberá de estar elegible para votar. El agente deberá ser el esposo, esposa, padre, madre, hijo o hija del suplicante.)

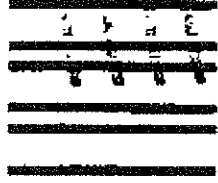
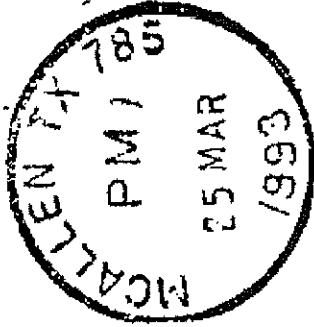
**RECEIVED 29 1998**

Address (Dirección)

**614 E Plaza Weslaco TX**

Relationship (Parentesco)

For Assistance Call  
Si Necesita Asistencia  
Secretary of State's  
Llame Gratis Al:  
Office Toll Free:  
1-800-252-(VOTE) 8683



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX



POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE

(CITY)

Edinburg

(ZIP CODE)

TX 78539-



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1054032099

GONZALO GARCIA  
1202 JOYCE ST  
WESLACO TX 78599

BIRTHDATE [REDACTED] CURRENT PRECINCT: 058      DATE OF RECORD: 09/15/2015

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

April 22, 2016

SAN JUANITA B GARCIA  
637 N VERMONT AVE  
MERCEDDES TX 78570

VOID: 1053509668

Idnumber: 195660

Notice #: N2438394



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12138-81 NCTZ

n\_rej\_2s  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

RETURN ADDRESS  
 NOE O. PEREZ  
 ELECTIONS ADMINISTRATOR  
 P.O. BOX 659  
 EDINBURG, TEXAS 78540-0659  
 (956) 318-2570

Secretary of State's Office  
 Elections Division  
 1-800-252-VOTE (8683)

PRESORTED  
 FIRST CLASS  
 U.S. POSTAGE  
 EDINBURG, TX  
 PERMIT # 65

RETURN SERVICE REQUESTED



VOTER REGISTRATION CERTIFICATE  
 (Certificado de Registro Electoral)

COUNTY (Condado)

Cert. No. (Núm. de Cert.)	Gender (Sexo)	Valid from (Válido desde)
195660	F	01/01/98
Date of Birth (Fecha de Nacimiento)	No. in Party (No. en el Partido)	Term (hasta)
08/21/1952	32	12/31/99

Name and Permanent Residence Address (Nombre y dirección residencial permanente)

GARCIA, SAN JUANITA B  
 206 AVE. A  
 MERCEDES, TX 78570

*INCORRECT*

Party Primary  
 Voted in the  
 (Votó en la elección primaria del partido político nombrado arriba)

You reside in these political districts:  
 (Usted vive en estos distritos políticos:)

CONGRESS	SENATE	HOUSE	COM	JP
15	27	39	1	1

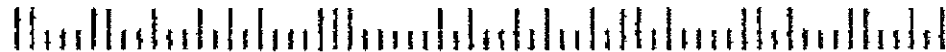
Name and Mailing Address (Nombre y dirección de correo)

GARCIA, SAN JUANITA B  
 637 N VERMONT  
 MERCEDES, TX 78570

X

VOTER MUST PERSONALLY SIGN HIS/HER NAME IMMEDIATELY UPON RECEIPT, IF ABLE  
 (El votante debe firmar esta tarjeta personalmente al punto de recibirla, si puede.)

AUTO



You may vote without your certificate by showing another form of identification. If you lose your certificate, you may request a replacement certificate by contacting the voter registrar. (Usted podrá votar sin su certificado de votante si presenta otra forma de identificación. Si pierde su certificado, usted podrá pedir un certificado de reemplazo comunicandose con el registrador de votantes.)

You will receive a new certificate every two years as long as your voter registration is not cancelled under some provision of the law. Voting by use of this certificate by any person other than the person in whose name this certificate is issued is a felony. (Usted recibirá un certificado nuevo cada dos años mientras que no se cancele su certificado bajo alguna disposición de la ley. El uso de este certificado por alguna persona que no sea la persona cuyo nombre aparece en el certificado es un delito.)

If you move within the county, you must transfer your registration to your new address after you move. You may vote a full ballot at your previous precinct if your registration has not become effective in your new precinct. Before you are allowed to vote in the previous precinct, the election judge will ask you to fill out a statement of residence confirming your new address in your new precinct. (Si usted cambia de domicilio dentro del mismo condado, deberá transferir su inscripción de votante después del cambio. En caso de que no haya entrado en vigencia su inscripción en el nuevo precinto, podrá votar con boleta integra en su precinto anterior. Antes de darle autorización para votar en el precinto anterior, el juez electoral le pedirá que llene una declaración de residencia en la que confirme su nueva dirección en el precinto nuevo.)

If you move from one Texas county to another, you must re-register in the county of your new residence. However, you may be eligible to vote a limited ballot for 90 days after you move if your new registration is not yet effective. Contact the county clerk or elections administrator in your new county for information. (Si usted cambia su residencia de un condado a otro dentro del Estado de Texas, usted deberá registrarse de nuevo en el condado de su residencia nueva. Sin embargo, usted puede tener derecho a votar una boleta limitada por un plazo de 90 días después de que cambie su residencia si su nuevo certificado de votante todavía no está vigente. Para recibir información, comuníquese con el Secretario del Condado o el administrador de elecciones de condado de su residencia nueva.)

If any information on this certificate changes or is incorrect, including birthdate, correct the information in the space provide below, sign and return this certificate to the voter registrar. (Si resulta que alguna información sobre este certificado de votante cambia o está incorrecta, incluyendo la fecha de nacimiento, favor de corregir la información en el espacio provisto abajo, y luego firme y devuelva este certificado de votante al registrador de votantes.)

Residence Address  
CS 637 N. VERMONT  
Mercedes TX 78570

I affirm the changes made to the left are correct. (Afirmo que los cambios hechos al lado izquierdo están correctos.)  
Marjunta B. Garcia  
Signature of Voter (Firma del votante)



# VOTER REGISTRATION APPLICATION

(SOLICITUD PARA REGISTRO DE VOTANTE)

(Articles 5.13a and 5.13b., Vernon's Texas Election Code)

PLEASE COMPLETE ALL OF THE INFORMATION BELOW. PRINT IN INK OR TYPE.

(POR FAVOR COMPLETE LA INFORMACION SIGUIENTE. ESCRIBA EN LETRA DE MOLDE CON TINTA O ESCRIBA A MAQUINA)

OFFICIAL USE ONLY  
(SOLAMENTE PARA USO OFICIAL)

CERTIFICATE NUMBER APPLICATION NUMBER

00195600

PCT 32 EDR

LAST NAME (APELLIDO)	FIRST NAME (NOT HUSBAND'S) (NOMBRE—NO DEL ESPOSO)	MIDDLE NAME (SEGUNDO NOMBRE)	MAIDEN NAME (APELLIDO DE SOLTERA)
GARCIA	SAN JUANITA	B.	

SEX (SEXO)	DATE OF BIRTH (FECHA DE NACIMIENTO) MONTH DAY YEAR	PLACE OF BIRTH (LUGAR DE NACIMIENTO) CITY OR COUNTY (CIUDAD O CONDADO)	STATE OR FOREIGN COUNTRY (ESTADO O PAIS EXTRANJERO)	IF YOU ARE A NATURALIZED CITIZEN, INDICATE THE COURT OF NATURALIZATION OR ITS LOCATION: (SI ES CIUDADANO NATURALIZADO INDIQUE LA CORTE DE NATURALIZACION O SU LOCALIDAD)
F		WESLALO		

PERMANENT ADDRESS: STREET ADDRESS AND APARTMENT NUMBER; IF NONE, DESCRIBE LOCATION OF RESIDENCE: (DIRECCION DE RESIDENCIA PERMANENTE: Calle y número de departamento; si no tiene, debe dar una descripción de la localidad:)	IF MAIL CANNOT BE DELIVERED TO PERMANENT RESIDENCE ADDRESS, PROVIDE MAILING ADDRESS: (EN CASO DE QUE EL CORREO NO PUEDA SER ENTREGADO A SU RESIDENCIA PERMANENTE, DEBE DAR OTRA DIRECCION PARA ENTREGA)
206 Ave "A" Mercedes	637 N. Vermont

CITY, STATE, and ZIP: (CIUDAD, ESTADO Y ZONA POSTAL)	
IF YOU ARE NOW REGISTERED IN ANOTHER TEXAS COUNTY, COMPLETE THE FOLLOWING: (SI ESTAS REGISTRADO EN OTRO CONDADO DE TEJAS COMPLETE LO SIGUIENTE:)	IF YOU WERE REGISTERED BUT DID NOT RECEIVE A NEW CERTIFICATE, COMPLETE THE FOLLOWING: (SI ESTABA REGISTRADO PERO NO RECIBIO SU CERTIFICADO NUEVO COMPLETE LO SIGUIENTE:)
COUNTY OF FORMER RESIDENCE: (Condado de residencia previa:)	COUNTY OF PREVIOUS REGISTRATION: (Condado de registro previo:)
RESIDENCE ADDRESS AS SHOWN ON CERTIFICATE IN THAT COUNTY: (Dirección de residencia mostrada en el certificado de ese condado:)	RESIDENCE ADDRESS AS SHOWN ON PREVIOUS CERTIFICATE: (Dirección de residencia mostrada en su certificado previo:)

*SOCIAL SECURITY NUMBER (NUMERO DE SEGURO SOCIAL)	TELEPHONE NUMBER (OPTIONAL) (TELEFONO OPCIONAL)	CURRENT PRECINCT NUMBER OR NAME, IF KNOWN: (OPTIONAL) (NUMERO DE PRECINTO O EL NOMBRE DEL SITIO OPCIONAL)

THE APPLICANT IS A CITIZEN OF THE UNITED STATES AND A RESIDENT OF THIS COUNTY. I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT. I UNDERSTAND THAT THE GIVING OF FALSE INFORMATION TO PROCURE THE REGISTRATION OF A VOTER IS A FELONY.  
(El solicitante es ciudadano estadounidense y residente de este condado. Afirma que la información proporcionada es verdadera. Comprendo que es una felonía de proporcionar información falsa para tratar registración de votante.)

X *Candido Garcia L.*

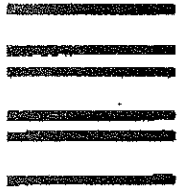
SIGNATURE OF APPLICANT (OR AGENT)  
(FIRMA DE SOLICITANTE O AGENTE)

FOR AGENT:  
(PARA AGENTE)  
Application may be by agent who must be a qualified voter of this county and must be the applicant's husband, wife, father, mother, son, or daughter.  
(La solicitud puede efectuarse con la ayuda de un votante calificado en el condado que sea uno de los siguientes: esposo, esposa, padre, madre, hijo, o hija.)  
I AM THE \_\_\_\_\_ OF THE APPLICANT.  
(Yo soy el/la) (relationship) (relación) (del solicitante)

FOR WITNESS:  
(PARA TESTIGO)  
If the applicant is unable to sign his name, he shall make his mark in the presence of a witness. If the applicant is unable to make his mark, the witness shall state that fact on the application.  
(Si el solicitante no puede firmar su nombre, debe hacer su marca en la presencia de un testigo. Si el solicitante no puede hacer su marca, el testigo debe declarar la razón sobre la solicitud.)  
Signature and address of witness:  
(Firma y dirección del testigo:)

\*The disclosure of social security number is voluntary. It is solicited by authority of Article 5.13b, V.T.E.C. and will be used only to maintain the accuracy of the registration records.  
(La revelación de su número de seguro social es totalmente voluntario. Su número es solicitado por autoridad de Artículo 5.13b, V.T.E.C., y será utilizado únicamente para preservar la exactitud de los archivos de registro.)

For Assistance Call  
*Si Necesita Asistencia*  
Secretary of State's  
*Llame Gratis Al:*  
Office Toll Free:  
1-800-252-9602



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY CARD**

FIRST CLASS PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE

TX

Zip Code

RECEIVED SEP 12 1984





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

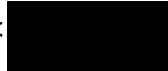
**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1053509668

SAN JUANITA B GARCIA  
637 N VERMONT AVE  
MERCEDES TX 78570

BIRTHDATE:



CURRENT PRECINCT: 085

DATE OF RECORD: 03/06/2013

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

April 22, 2016

MARIA D GONZALEZ  
PO BOX 1221  
SAN JUAN TX 78589

VUID: 1183975641

Idnumber: 10083568

Notice #: N2438426



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12138-145 NCTZ

n\_ref\_26  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

**Texas Voter Registration Application**

For Official Use Only

Presented by the Office of the Secretary of State. VR30.2011E.11

*Hidalgo 30*

Please complete sections by printing LEGIBLY. If you have any questions about how to fill out this application, please call your local voter registrar.

**1 These Questions Must Be Completed Before Proceeding**

Check one

- New Application     Change of Address, Name, or Other Information     Request for a Replacement Card

Are you a United States Citizen?     Yes     No

Will you be 18 years of age on or before election day?     Yes     No

**If you checked "No" in response to either of the above, do not complete this form.**

Are you interested in serving as an election worker?     Yes     No

<b>2</b> Last Name (Include Suffix if any (Jr, Sr, III))	First Name	Middle Name (if any)	Former Name (if any)
<i>Gonzalez</i>	<i>Maria</i>	<i>D.</i>	

<b>3</b> Residence Address: Street Address and Apartment Number. If none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address)	City	State
<i>614 E 4th St.</i>	<i>San Juan</i>	<i>TX</i>
	County	Zip Code
	<i>Hidalgo</i>	<i>78509</i>

<b>4</b> Mailing Address: Street Address and Apartment Number. (If mail cannot be delivered to your residence address.)	City	State
<i>P.O. Box 1221</i>	<i>San Juan</i>	<i>TX</i>
		Zip Code
		<i>78509</i>

<b>5</b> Date of Birth: (mm/dd/yyyy)	<b>6</b> Gender (Optional)	<b>7</b> Telephone Number (Optional) Include Area Code
[REDACTED]	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	<i>(956) 867-7609</i>

<b>8</b> Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)	If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number
[REDACTED]	[REDACTED]

**9** I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. Please read all three statements to affirm before signing.

- I am a resident of this county and a U.S. citizen;
- I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- 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.

RECEIVED MAR 22 2012

**X** *Maria D. Gonzalez*    Date *03/07/12*

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1183975641

MARIA D GONZALEZ  
614 E 4TH ST  
SAN JUAN TX 78589

BIRTHDATE



CURRENT PRECINCT: 156

DATE OF RECORD: 03/22/2012

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

ALFREDO GRIMALDO  
6508 SAMOA DR  
WESLACO TX 78599

VOID: 1139990362

Idnumber: 10003179

Notice #: N2443939



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-43 NCTZ

n\_rei\_2s  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

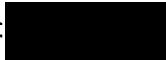
**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1139990362

ALFREDO GRIMALDO  
6508 SAMOA DR  
WESLACO TX 78599

BIRTHDATE:



CURRENT PRECINCT: 041

DATE OF RECORD: 06/02/2014

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:





Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

August 31, 2016

ANA MARIA GUERRA  
PO BOX 1223  
SAN JUAN TX 78589

VUID: 1053153012

Idrnumber: 145806

Notice #: N2443933



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-37 NCTZ

n\_reg\_2a  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

Official Use Only

Official Use Only

PCT (11)

EDR (12)

VOTER REGISTRATION APPLICATION/CHANGE FORM (Art 5. 13a)

Certificate Number

Application Number

59

00458006

If you are a NEW REGISTRANT or if you have changed your county of residence, complete all of the information below. Print in ink or type

To CHANGE registration form

If you are registered to vote and need to change any information on your certificate, complete the following and show only the changed information to the left.

LAST NAME (02)

First Name (Not Husband's) (03)

MIDDLE NAME (04)

Guerra

Ana

Maria

2

MAIDEN NAME (04)

SOCIAL SECURITY NUMBER (05)

BIRTHDATE (06)

Benavidez

[REDACTED]

BIRTH PLACE City (07)

or County (07)

State of Birth (08) (or foreign country)

SEX (09)

Pharr

1

Hidalgo

2

Texas

F

PERMANENT RESIDENCE ADDRESS (13)

CITY (14)

ZIP (15)

Street and apt. no. or route no. or location (not P.O. Box)

819 W. Ebony

San Juan

78589

MAILING ADDRESS IF DIFFERENT (16)

CITY/STATE (17)

ZIP (18)

Street or P.O. Box

P.O. Box 1223

San Juan, Tex.

78589

Phone Number (Optional)

If you are a naturalized citizen indicate court or its location

If you are now registered in another Texas county or were registered and failed to receive new certificate, indicate

COUNTY (10)

FORMER ADDRESS

CERTIFICATE NUMBER

LAST NAME as it appears on certificate

TODAY'S DATE

Return your current registration certificate for correction, or if your certificate has been lost or destroyed, initial the box below.

[Empty box for returning certificate]

The disclosure of Social Security number is voluntary only, is solicited by authority of Section 45b Texas Election Code and will be used only by election officials to maintain the accuracy and integrity of the registration records.

I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT. THE APPLICANT IS A CITIZEN OF THE UNITED STATES, HAS MET ALL LEGAL REQUIREMENTS, AND HOLDS LEGAL RESIDENCE IN THE COUNTY. I UNDERSTAND THAT THE GIVING OF FALSE INFORMATION TO PROCURE THE REGISTRATION OF A VOTERS IS A FELONY.

x Ana Maria Guerra

SIGNATURE OF VOTER

Initial registration may be by agent, but agent must be registered voter and must either: (Circle one) Husband · Wife · Mother · Father · Son · Daughter

1676  
2762

RECEIVED FEB 25 1981

CHECKED JUL 18 1985

CIRO TREVINO  
ASSESSOR-COLLECTOR OF TAXES  
& VOTERS REGISTRAR  
COUNTY COURTHOUSE  
EDINBURG, TEXAS 78539

1676  
2762



NEW	ADD	SAVE	EXIT	Scan	Abs Update	Election Role	Notices	Districts	Updt <u>V</u> ot Hst	
				View	Prov Blts	Cancel	NVRA Dup	Polling Place	Reg Hist	View <u>V</u> ot Hst

NVRA Source	Date Submitted	Status / Reason	Precinct	Sub	CERT #
		A	156	01	145806
No Seasonal Addresses <Edit>		VID 1053153012		ID Compliant Y	

Last	First	Middle	Former	Suffix
GUERRA	ANA	MARIA		V

Residence Address							
Street #	Fract	Dir	Name	Type	Dir	Unit Type	Unit #
819			EBONY	AVE			
City	Zip	Muni	Post Office	Address Exception			
SJUAN	78589	SAN JUAN	SAN JUAN				

Mail Address		
PO BOX 1223		
City	State	
SAN JUAN	TX	
Zip	Non US Addr	Clear Mail Addr
78589		

Gender	DOB	DL#	SSN	SSN4	Has No ID
F					
Citizen?	PW Interest	Signed?			
Y		Y			
FPCA/YEAR Application	FPCA/YEAR Begin Date	FPCA/YEAR Party Code			
Birth Place	Jury	Privacy	Disability		
PHARR-TX					

ORIG REG	EDR
01/26/1981	02/25/1981
TEAM REG	VALID FROM
01/26/1981	01/01/2006
DATE OF REC	
09/19/2016	

ID Rcvd	More
N	

Comments	<input type="checkbox"/> Election Role	Last Year Voted	Updated by	
Jury wheel not applicable, voter is citizen		1998	BRENERIA	09/20/2016 11:52 AM

List <F9>



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 9th day of February, 2017

1053153012

ANA MARIA GUERRA  
819 EBONY AVE  
SAN JUAN TX 78589

BIRTHDATE [REDACTED] CURRENT PRECINCT: 156 DATE OF RECORD: 09/19/2016

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
11/03/1998	1998 GENERAL		P
03/10/1998	1998 PRIMARY	D	P

SIGNED:



**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

ARTURO JUAREZ  
3717 BLUEBIRD AVE  
MCALLEN TX 78504

VOID: 1218739999

Idnumber: 10158779

Notice #: N2443966



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-18 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rej\_2s  
150721



**ELECTIONS DEPARTMENT**  
County of Hidalgo

March 19, 2015

ARTURO JUAREZ  
3717 BLUEBIRD AVE  
MCALLEN TX 78504

Idnumber: 10158779

Notice #: N2034202



**NOTICE OF INCOMPLETE INFORMATION ON VOTER REGISTRATION APPLICATION**

Dear Applicant,

Notice is hereby given that your application for voter registration has been reviewed and does not include all information required:

You provided your driver's license or personal identification number but the number did not match the Department of Public Safety record.

I am enclosing another application for you to complete. You must fill out all information on the application unless indicated as optional. If your revised application is received with 10 days of this notice, your registration will become effective 30 days from the date the original application was received. If the revised application is received after 10 days of this notice, your registration will become effective 30 days after the postmark of the revised application.

Should you have any questions regarding this notice or any other voter registration matter, please contact me at (956) 318-2570.

Sincerely,

Yvonne Ramón  
Hidalgo County Elections Administrator

BRENERIA  
11931-29 NDPS

n\_res\_2s  
120826

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

Texas Voter Registration Application

For Official Use Only

Prescribed by the Office of the Secretary of State

VR1720110-13

10158779

Please complete sections by printing LEGIBLY. If you have any questions about how to fill out this application, please call your local voter registrar.

1 These Questions Must Be Completed Before Proceeding

Check one

- New Application Change of Address, Name, or Other Information Request for a Replacement Card

Are you a United States Citizen? Yes No

Will you be 18 years of age on or before election day? Yes No

If you checked No in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? Yes No

2 Last Name First Name Middle Name Former Name

Arturo Juarez Arturo

3 Residence Address: Street Address and Apartment Number. If none, describe where you live. City TEXAS

3717 Bluebird Ave. McAllen Hidalgo 78504

4 Mailing Address: Street Address and Apartment Number. City State

3717 Bluebird Ave. McAllen TX 78504

5 Date of Birth: Gender (Optional) Telephone Number

Male Female (956) 392-4935

8 Texas Driver's License No. or Texas Personal I.D. No. If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number

XXX-XX- [redacted]

I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.

9 I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

- I am a resident of this county and a U.S. citizen;
I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
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.

RECEIVED MAR 06 2015

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. Date 3/6/15





**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1218739999

ARTURO JUAREZ  
3717 BLUEBIRD AVE  
MCALLEN TX 78504

BIRTHDATE:



CURRENT PRECINCT: 081

DATE OF RECORD: 10/19/2015

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



ELECTIONS DEPARTMENT  
County of Hidalgo

August 31, 2016

DAHLIA LOZANO  
719 SCARLET DR  
PHARR TX 78577

VUID: 1053941096

Idnumber: 183782

Notice #: N2443968



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-34 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

P\_TPL\_2s  
150721

**Instructions for Voting by Mail on Back**  
(Al Dorso: Instrucciones si vota por correo)

B3-1-41 (10/09)

**STATEMENT OF RESIDENCE**

For persons whose residence address does not match voter registration address.

**CONSTANCIA DE DOMICILIO PERMANENTE**

Para personas cuya dirección no coincide con la que aparece en la lista oficial de votantes inscritos.

<b>Last Name</b> Include suffix if any Apellido Incluir sufijo si lo hay (Jr., Sr., III) <u>Lozano</u>	<b>First Name</b> Nombre de pila <u>Dahlia</u>	<b>Middle Name (if any)</b> Segundo nombre (si aplica)	<b>Former Name</b> Apellido anterior
<b>Residence Address: Street Address and Apartment Number, City, State, and Zip.</b> If none, describe where you live. (Do not include P.O. Box, Rural Route, or Business Address) Domicilio residencial: Número y calle, y número de apartamento, Ciudad, Estado, y Código postal. Si no existe un domicilio, describa donde vive (no incluya apartados postales, rutas rurales o dirección del trabajo). <u>719 Scarlett Dr Pharr, TX, 78577</u>			<b>Gender (Optional)</b> Sexo (Optativo) <input type="checkbox"/> Male Masculino <input checked="" type="checkbox"/> Female Femenino

<b>Mailing Address: Address, City, State, and Zip: If mail cannot be delivered to your residence address.</b> Dirección postal: Número y calle, y número de apartamento, Ciudad, Estado, y Código postal (si no se puede entregar correo en su domicilio residencial). <u>719 Scarlett Dr. Pharr, TX 78577</u>	<b>Date of Birth: month, day, year</b> Fecha de Nacimiento: mes, día, año [Redacted]
--	--

<b>Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)</b> No. de licencia de conducir de Texas o no. de identificación personal de Texas (Expedido por el Departamento de Seguridad Pública) [Redacted]	<b>If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number.</b> Si no tiene licencia de conducir de Texas o no. de identificación personal, proporcione los 4 últimos dígitos de su número de Seguro Social. XXX-XX-[ ] [ ] [ ] [ ]
--	--

I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.  
Yo no tengo una Licencia de conducir de Texas/Cédula de identidad personal de Texas o Número de Seguro Social.

- I am a resident of this county and a U.S. citizen; and
  - I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
  - 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.
- soy residente de este condado y ciudadano de los Estados Unidos; y
- no he sido condenado por un delito grave, o en caso de ser delincuente, he purgado mi pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de prueba, o se me otorgó un indulto; y
- no se me ha declarado, total o parcialmente, como discapacitado mental sin derecho al voto, por el fallo final de un juzgado de sucesiones

Dahlia Lozano Date 05/01/15  
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.  
Firma del solicitante o su agente (apoderado) y relación de éste con el solicitante, o nombre en letra del molde del solicitante si la firma es la de un testigo, y fecha.

173836

PCT (11) <b>25</b>	EDR (12)	VOTER REGISTRATION APPLICATION/CHANGE FORM (Art 5. 13a)	<b>00</b>
-----------------------	----------	---	-----------

Certificate Number <b>183782</b>	Application Number
-------------------------------------	--------------------

If you are a NEW REGISTRANT or if you have changed your county of residence, complete all of the information below. Print in ink or type

LAST NAME (02) <b>LOZANO</b>	First Name (Not Husband's) (03) <b>DAHLIA</b>	MIDDLE NAME (04) <b>2</b>
---------------------------------	--	------------------------------

MAIDEN NAME (04)	SOCIAL SECURITY NUMBER (05)	BIRTHDATE (06)
	[REDACTED]	[REDACTED]

BIRTH PLACE City (07) <b>PHARR</b>	or County (07) <b>1 HIDALGO 2</b>	State of Birth (08) (or foreign country) <b>TEXAS</b>	SEX (09) <b>F</b>
---------------------------------------	--------------------------------------	---	----------------------

PERMANENT RESIDENCE ADDRESS (13) Street and apt. no. or route no. or location (not P.O. Box) <b>907 South RICHMOND</b>	CITY (14) <b>PHARR</b>	ZIP (15) <b>78577</b>
--	---------------------------	--------------------------

MAILING ADDRESS IF DIFFERENT (16) Street or P. O. Box	CITY/STATE (17)	ZIP (18)

Phone Number (Optional) <b>787-6381</b>	If you are a naturalized citizen indicate court or its location
--	---

If you are now registered in another Texas county or were registered and failed to receive new certificate, indicate COUNTY (10)	FORMER ADDRESS

I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT. THE APPLICANT IS A CITIZEN OF THE UNITED STATES, HAS MET ALL LEGAL REQUIREMENTS, AND HOLDS LEGAL RESIDENCE IN THE COUNTY. I UNDERSTAND THAT THE GIVING OF FALSE INFORMATION TO PROCURE THE REGISTRATION OF A VOTERS IS A FELONY.

*x Dahlia Lozano*

SIGNATURE OF VOTER Initial registration may be by agent, but agent must be registered voter and must either: (Circle one) Husband - Wife - Mother - Father - Son - Daughter

To CHANGE registration form

If you are registered to vote and need to change any information on your certificate, complete the following and show only the changed information to the left.

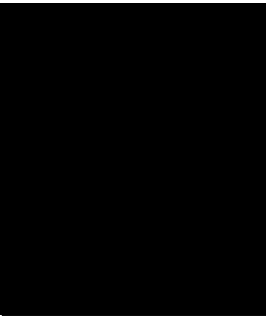
CERTIFICATE NUMBER
LAST NAME as it appears on certificate
TODAY'S DATE

Return your current registration certificate for correction, or if your certificate has been lost or destroyed, initial the box below.

[Empty box for return certificate]

The disclosure of Social Security number is voluntary only. It is solicited by authority of Section 43b Texas Election Code and will be used only by election officials to maintain the accuracy and integrity of the registration records.

787-7182 - A. Valverde



RECEIVED MAR 07 1984

CIRO TREVINO  
ASSESSOR-COLLECTOR OF TAXES  
& VOTERS REGISTRAR  
COUNTY COURTHOUSE  
EDINBURG, TEXAS 78539

CHECKED MAY 21 1985



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

HIDALGO COUNTY  
VOTING HISTORY RECORD

The following is the voting history on file in HIDALGO COUNTY  
as of this 9th day of February, 2017

1053941096

DAHLIA LOZANO  
719 SCARLET DR  
PHARR TX 78577

BIRTHDATE [REDACTED] CURRENT PRECINCT: 025      DATE OF RECORD: 05/01/2015

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
03/01/2016	2016 Primary Election	D	E
05/09/2015	May 09, 2015 Local Entities		E
11/06/2012	2012 GENERAL ELECTION		P
11/04/2008	GENERAL ELECTION		E
11/02/2004	2004 GENERAL		P
11/05/2002	2002 GENERAL		P
11/03/1998	1998 GENERAL		P

SIGNED:





**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

EDUARDO MALDONADO  
3507 N 32ND LN  
MCALLEN TX 78501

VUID: 1153560649

Idnumber: 10028224

Notice #: N2443931



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este pais. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-11 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rsl\_2s  
150721



# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

<b>Last Name</b> (Apellido usual) <b>MALDONADO</b>	<b>First Name</b> (Nombre) <b>EDUARDO</b>	<b>Middle Name (If any)</b> (Segundo Nombre (si hay))	<b>Former Name</b> (Nombre Anterior)
--	---	--	---

**Residence Address: Street Address and Apartment Number, City, State and Zip. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)**  
(Dirección residencial (Domicilio): Calle y número y número de apartamento, Ciudad, Estado y Código Postal. Si falta el CP, describa dónde vive.) (No incluya el apartado postal ni la ruta rural)

**3507 N 32ND LN, MCALLEN, TX 785010000, HIDALGO**

<b>Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address.</b> (Dirección para Correspondencia: Calle y número y número de apartamento, o Apartado Postal, Ciudad, Estado y Código Postal, si es que no se puede entregar correspondencia a su dirección residencial.)	<b>Gender (Optional)</b> (Sexo) (Optativo) <input type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
--	---

<b>Date of Birth: month, day, year</b> (Fecha de nacimiento): (mes, día, año) [REDACTED]	<b>If you check 'no' in the response below, do not complete this form.</b> (En caso de dado una respuesta negativa a cualquiera de las preguntas anteriores, no llene el resto del formulario.)
--	---

**Check appropriate box: I AM A UNITED STATES CITIZEN**  
(Marque el cuadro apropiado: ¿Es usted ciudadano/a de los Estados Unidos?)

Yes (Sí)  No (No)

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.** (Entiendo que el hecho de dar datos falsos con el afán de obtener el registro de votante constituye perjurio, siendo éste un delito a tenor de las leyes federales y estatales. Una condena por dicho delito puede conllevar encarcelamiento por 180 días, una multa hasta de dos mil dólares o ambas sanciones.)

- I affirm that I (Afirmo)**
- **am a resident of this county;** (que soy residente de este condado)
  - **have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and** (que no he sido condenado/a por un delito mayor ("felonía") o, si se me ha condenado por tal delito, he cumplido integralmente la condena correspondiente, incluso cualquier período de reclusión carcelaria, libertad condicional, supervisión, probatoria (sentencia condicional) o que soy beneficiario/a de un indulto;)
  - **have not been declared mentally incompetent by final judgment of a court of law.** (que ninguna decisión definitiva de un tribunal me ha declarado mentalmente incapacitado/a.)

**TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety)** (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas)



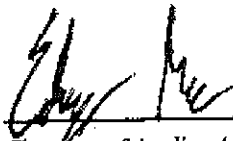
**Are you interested in serving as an election worker?** (¿Le interesaría servir de trabajador (a) electoral?)

Yes (sí)  No (No)

**Check one (Marque una de las respuestas)**

Esta es una solicitud  New (Nueva)  Change (Modificada)  Replacement (Sustitutiva)

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.** (Firma de/de la solicitante o su Agente (apoderado/ a) y el parentesco entre los dos o el Nombre en Letra de Molde del/de la Solicitante si la firma es la de un(a) testigo. Indique la fecha.)

 **05 20 2008**  
Date (fecha)

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only *UW 824*  
EDR

Last Name (Apellido usual)

**MALDONADO**

First Name (Nombre)

**EDUARDO**

Middle Name (if any) (Segundo Nombre (si hay))

Former Name (Nombre Anterior)

Residence Address: Street Address and Apartment Number, City, State and Zip. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) (Dirección residencial (Domicilio): Calle y número y número de apartamento, Ciudad, Estado y Código Postal. Si falta el CP, describa dónde vive.) (No incluya el apartado postal ni la ruta rural)

**3507 N 32ND LN, MCALLEN, TX 785010000, HIDALGO**

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección para Correspondencia: Calle y número y número de apartamento, o Apartado Postal, Ciudad, Estado y Código Postal, si es que no se puede entregar correspondencia a su dirección residencial.)

Gender (Optional) (Sexo) (Optativo)

Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year (Fecha de nacimiento): (mes, día, año)

If you check 'no' in the response below, do not complete this form. (En caso de dado una respuesta negativa a cualquiera de las preguntas anteriores, no llene el resto del formulario.)

Check appropriate box: I AM A UNITED STATES CITIZEN (Marque el cuadro apropiado: ¿Es usted ciudadano/a de los Estados Unidos?)

Yes (SI)  No (NO)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. (Entiendo que el hecho de dar datos falsos con el afán de obtener el registro de votante constituye perjurio, siendo éste un delito a tenor de las leyes federales y estatales. Una condena por dicho delito puede conllevar encarcelamiento por 180 días, una multa hasta de dos mil dólares o ambas sanciones.)

I affirm that I (Afirmo)

- am a resident of this county; (que soy residente de este condado)
- have not been finally convicted of a felony or If a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and (que no he sido condenado/a por un delito mayor ("felonía") o, si se me ha condenado por tal delito, he cumplido integralmente la condena correspondiente, incluso cualquier periodo de reclusión carcelaria, libertad condicional, supervisión, probatoria (sentencia condicional) o que soy beneficiario/a de un indulto;y)
- have not been declared mentally incompetent by final judgment of a court of law. (que ninguna decisión definitiva de un tribunal me ha declarado mentalmente incapacitado/a.)

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas)

Are you interested in serving as an election worker? (¿Le interesaría servir de trabajador (a) electoral?)  Yes (sí)  No (No)

Check one (Marque una de las respuestas)

Esta es una solicitud (Nueva)  Change (Modificada)  Replacement (Sustitutiva)

**05 20 2008**

Date (fecha)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma de/de la solicitante o su Agente (apoderado/ a) y el parentesco entre los dos o el Nombre en Letra de Molde del/de la Solicitante si la firma es la de un(a) testigo, Indique la fecha.)

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only

10028224

EDR

Last Name (Apellido usual) <b>MALDONADO</b>	First Name (Nombre) <b>EDUARDO</b>	Middle Name (If any) (Segundo Nombre (si hay))	Former Name (Nombre Anterior)
--	---------------------------------------	--	-------------------------------

Residence Address: Street Address and Apartment Number, City, State and Zip. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) (Dirección residencial (Domicilio): Calle y número y número de apartamento, Ciudad, Estado y Código Postal. Si falta el CP, describa dónde vive.) (No incluya el apartado postal ni la ruta rural)

**3507 N 32ND LN, MCALLEN, TX 785010000, HIDALGO**

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección para Correspondencia: Calle y número y número de apartamento, o Apartado Postal, Ciudad, Estado y Código Postal, si es que no se puede entregar correspondencia a su dirección residencial.)	Gender (Optional) (Sexo) (Opcativo) <input type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
---	---

Date of Birth: month, day, year (Fecha de nacimiento) (mes, día, año) [REDACTED]	If you check 'no' in the response below, do not complete this form. (En caso de dado una respuesta negativa a cualquiera de las preguntas anteriores, no llene el resto del formulario.)
---	--

Check appropriate box: I AM A UNITED STATES CITIZEN (Marque el cuadro apropiado: ¿Es usted ciudadano/a de los Estados Unidos?)

Yes (Si)  No (No)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. (Entiendo que el hecho de dar datos falsos con el afán de obtener el registro de votante constituye perjurio, siendo éste un delito a tenor de las leyes federales y estatales. Una condena por dicho delito puede conllevar encarcelamiento por 180 días, una multa hasta de dos mil dólares o ambas sanciones.)

- I affirm that I (Afirmo)
- am a resident of this county; (que soy residente de este condado)
  - have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and (que no he sido condenado/a por un delito mayor ("felonía") o, si se me ha condenado por tal delito, he cumplido integralmente la condena correspondiente, incluso cualquier período de reclusión carcelaria, libertad condicional, supervisión, probatoria (sentencia condicional) o que soy beneficiario/a de un indulto;y)
  - have not been declared mentally incompetent by final judgment of a court of law. (que ninguna decisión definitiva de un tribunal me ha declarado mentalmente incapacitado/a.)

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas)

Are you interested in serving as an election worker? (¿Le interesaría servir de trabajador (a) electoral?)

Yes (Si)  No (No)

Check one (Marque una de las respuestas)

Esta es una solicitud (Nueva)  Change (Modificada)  Replacement (Sustitutiva)

X

05 20 2008  
Date (fecha)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma de/de la solicitante o su Agente (apoderado/a) y el parentesco entre los dos o el Nombre en Letra de Molde de/de la Solicitante si la firma es la de un(a) testigo, Indique la fecha.)



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

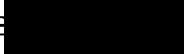
**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1153560649

EDUARDO MALDONADO  
3507 N 32ND LN  
MCALLEN TX 78501

BIRTHDATE



CURRENT PRECINCT: 161

DATE OF RECORD: 03/17/2012

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

August 31, 2016

JUAN CARLOS MARTINEZ JR  
1916 LOMA VERDE ST  
SAN JUAN TX 78589

VUID: 1184904990

Idnumber: 10084428

Notice #: N2443940



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este pais. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral


Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-38 NCTZ

n\_reg\_2s  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

DPS Voter Application  
HIDALGO

Last Name (Include Suffix if any) MARTINEZ JR		First Name JUAN	Middle Name (if any) CARLOS	Former Name (if any)
Residence Address: Street Address and Apartment Number If none, describe where you live. (Do not include P.O. Box, Rural Business Address)  1916 LOMA VERDE DR			City SAN JUAN	TEXAS
			County HIDALGO	Zip Code 78589-3347
Mailing Address: Street Address and Apartment Number (If mail cannot be delivered to your residence address.)  1916 LOMA VERDE			City SAN JUAN	State TX
				Zip Code 78589
Date of Birth (mm/dd/yyyy)  [REDACTED]	Gender (Optional) MALE	Telephone Number (Optional) Include Area Code		
Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)  [REDACTED]		If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number  [REDACTED]		
<p>I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. Please read all three statements to affirm before signing.</p> <ul style="list-style-type: none"> <li>• I am a resident of this county and a U.S. citizen;</li> <li>• I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and</li> <li>• I have not been determined by final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.</li> </ul>				
 Signature of Applicant or Agent and Relationship to Applicant or Protection of Applicant if Signed by Witness and Date.		Date: 10/11/2016		

**Martinez Juan**  
**HAS APPLIED FOR A HUALAQUI COUNTY**  
**VOTER REGISTRATION CERTIFICATE**

For Official Use Only  
 ID **Chng** **10084428**

If you have any questions about how to fill out this application, call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD

Date **kw**

**Completed Before Proceeding**

Request for a Replacement Card

Are you a United States Citizen?  Yes  No

Will you be 18 years of age on or before election day?  Yes  No

Are you interested in serving as an election worker?  Yes  No

<b>2</b> Last Name (Include Suffix if any) <i>Martinez</i>	First Name <i>Juan</i>	Middle Name (if any) <i>Carlos</i>	Former Name (if any)
<b>3</b> Residence Address: Street Address and Apartment Number. If none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address) <i>1916 Loma Verde</i>		City <i>San Juan</i>	State <b>TEXAS</b> Zip Code
<b>4</b> Mailing Address: Street Address and Apartment Number. (If mail cannot be delivered to your residence address.)		City	State Zip Code

**5** Date of Birth: (mm/dd/yyyy) [REDACTED]

**6** Gender (Optional)  Male  Female

**7** Telephone Number (Optional) Include Area Code  
 (956) 723-7177

**8** Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)

If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number: XXX-XX-XXXX

I have not been issued a Texas Driver's License/Personal Identification Number.

**9** I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. Please read all three statements to affirm before signing.

- I am a resident of this county and a U.S. citizen;
- I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- 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.

**X** *Juan Carlos Martinez* Date **4 2012**

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

April 11, 2012

Idnumber: 10084428

Notice #: N1263332

JUAN CARLOS MARTINEZ  
1916 LOMA VERDE ST  
SAN JUAN TX 78589



NOTICE OF REJECTION OF APPLICATION FOR VOTER REGISTRATION

Dear Applicant:

Notice is hereby given that your application for voter registration has been rejected.

Information on your application indicates that you are ineligible for registration because you have not reached 17 years, 10 months of age.

If you have any questions regarding your application or any other voter registration matter, please contact our office at (956) 318-2570.

Sincerely,

Yvonne Ramón  
Hidalgo County Elections Administrator

IESPIRITU  
AGE

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rej\_2s  
110428



Notice #: N1263332

AVISO DE RECHAZO DE LA SOLICITUD DE INSCRIPCION ELECTORAL.

Estimado Votante,

Por medio de este, se le notifica que la solicitud para el registro de votantes ha sido rechazada.

La informacion en su solicitud indica que es inelegible para el registro, porque aun no alcanza los 17 anos, 10 meses en edad.

Si usted tiene alguna pregunta con respecto a su solicitud o cualquier otra materia del registro de votantes, favor de comunicarse al (956) 318-2570.

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

11/04/28

**Texas Voter Registration Application**

For Official Use Only

Prescribed by the Office of the Secretary of State VR17.092.13

Please complete sections by printing LEGIBLY. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

**1 These Questions Must Be Completed Before Proceeding**

Check one

- New Application     Change of Address, Name, or Other Information     Request for a Replacement Card

Are you a United States Citizen?     Yes     No

Will you be 18 years of age on or before election day?     Yes     No

Are you interested in serving as an election worker?     Yes     No

**2** Last Name (Include Suffix if any) First Name Middle Name (if any) Former Name (if any)  
 Martinez Sr, III Juan Carlos

**3** Residence Address: Street Address and Apartment Number, if none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address) City State Zip Code  
 1916 Loma Verde San Juan TEXAS 78589

**4** Mailing Address: Street Address and Apartment Number. (If mail cannot be delivered to your residence address.) City State Zip Code  
 1916 Loma Verde San Juan TX 78589

**5** Date of Birth: (mm/dd/yyyy) **6** Gender (Optional)  Male  Female **7** Telephone Number (Optional) Include Area Code  
 ( ) - -

**8** Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety) If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number.  
 XXX-XX

I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.

**9** I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. Please read all fine statements to affirm before signing.

- I am a resident of this county and a U.S. citizen;
- I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- 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.

RECEIVED FEB 28 2012

**X** Juan Carlos Martinez

Date 11 19 11

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant If Signed by Witness and Date.



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1184904990

JUAN CARLOS MARTINEZ JR  
1916 LOMA VERDE ST  
SAN JUAN TX 78589

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 117      DATE OF RECORD: 10/11/2016

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

ELECTIONS DEPARTMENT  
County of Hidalgo

August 31, 2016

ABIGAIL NOYOLA  
1607 HOOPER AVE  
SAN JUAN TX 78589

VOID: 1053149289

Idnumber: 204507

Notice #: N2443957



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-39 NCTZ

n\_16j\_2s  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

Additional Information

CHA

For Official Use Only

39

Cert. Num.

204507

Last Name (Apellido) NOYOLA

First Name (NOT HUSBAND'S) (Nombre de pila) (Siendo mujer: no el del esposo) ABIGAIL

Middle/Maiden Name (If any) (Segundo Nombre/Apellido de Soltera (si tiene)) SERNA

Former Name (Nombre anterior)

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) (Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.) 1607 HOOPER, SAN JUAN, TX 785890000, HIDALGO

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)

Gender (Optional)

(Sexo) (Opcativo)

Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year (Fecha) (mes, día, año)

City, County, and State of Former Residence (Ciudad, Condado, Estado de su residencia anterior)

Social Security No. (Optional) (Número de Seguro Social) (optativo)

Check appropriate box: I AM A UNITED STATES CITIZEN (Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos)  Yes (Si)  No (No)

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública) (optativo)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

Telephone Number (Optional) (Número telefónico) (optativo)

I affirm that I (Declaro que soy)

RECEIVED JAN 30 2003

Check one (Marque el cuadro)

New (Nuevo)  Change (Cambiar)  Replacement (Reemplazar)

- am a resident of this county; (residente del condado)
- have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
- have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial.)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.) X Abigail Noyola 01 22 2003

# VOTER REGISTRATION APPLICATION

(SOLICITUD PARA REGISTRO DE VOTANTE)

(Articles 5.13a and 5.13b, Vernon's Texas Election Code)

PLEASE COMPLETE ALL OF THE INFORMATION BELOW. PRINT IN INK OR TYPE.

(POR FAVOR COMPLETE LA INFORMACION SIGUIENTE. ESCRIBA EN LETRA DE MOLDE CON TINTA O ESCRIBA A MAQUINA)

OFFICIAL USE ONLY (SOLAMENTE PARA USO OFICIAL)	
CERTIFICATE NUMBER 09204507	APPLICATION NUMBER
PC# 44	EDR

LAST NAME (APELLIDO) Noyola	FIRST NAME (NOT HUSBAND'S) (NOMBRE—NO DEL ESPOSO) Abigail	MIDDLE NAME (SEGUNDO NOMBRE)	MAIDEN NAME (APELLIDO DE SOLTERA) Serna
-----------------------------------	---	---------------------------------	---

SEX (SEXO) F	DATE OF BIRTH (FECHA DE NACIMIENTO) MONTH DAY YEAR (MES) (DIA) (AÑO) 2 20 63	PLACE OF BIRTH (LUGAR DE NACIMIENTO) CITY OR COUNTY (CIUDAD O CONDADO) Reynosa	STATE OR FOREIGN COUNTRY (ESTADO O PAIS EXTRANJERO) Mx.	IF YOU ARE A NATURALIZED CITIZEN, INDICATE THE COURT OF NATURALIZATION OR ITS LOCATION; (SI ES CIUDADANO NATURALIZADO INDIQUE LA CORTE DE NATURALIZACION O SU LOCALIDAD) Edinburg
--------------------	--	--	---	---

PERMANENT RESIDENCE ADDRESS: STREET ADDRESS AND APARTMENT NUMBER; IF NONE, DESCRIBE LOCATION OF RESIDENCE; (DIRECCION DE RESIDENCIA PERMANENTE: Calle y numero de apartamento, si no tiene, indique una descripción de la localidad) 507 7th St. City, State, and ZIP: (CIUDAD, ESTADO Y ZONA POSTAL) Dor 8811 Cleburne TX	IF MAIL CANNOT BE DELIVERED TO PERMANENT RESIDENCE ADDRESS, PROVIDE MAILING ADDRESS; (EN CASO DE QUE EL CORREO NO PUEDA SER ENTREGADO A SU RESIDENCIA PERMANENTE, DEBE DAR OTRA DIRECCION PARA ENTREGO)
---	--

IF YOU ARE NOW REGISTERED IN ANOTHER TEXAS COUNTY, COMPLETE THE FOLLOWING: (SI ESTAS REGISTRADO EN OTRO CONDADO DE TEXAS COMPLETE LO SIGUIENTE) COUNTY OF FORMER RESIDENCE: (Condado de residencia previa:)	RESIDENCE ADDRESS AS SHOWN ON CERTIFICATE IN THAT COUNTY: (Dirección de residencia mostrada en el certificado de ese condado:)	IF YOU WERE REGISTERED BUT DID NOT RECEIVE A NEW CERTIFICATE, COMPLETE THE FOLLOWING: (SI ESTABA REGISTRADO PERO NO RECIBIO SU CERTIFICADO NUEVO COMPLETE LO SIGUIENTE) COUNTY OF PREVIOUS REGISTRATION: (Condado de registro previo:)	RESIDENCE ADDRESS AS SHOWN ON PREVIOUS CERTIFICATE: (Dirección de residencia mostrada en su certificado previo:)
--	---	---	---

*SOCIAL SECURITY NUMBER (NUMERO DE SEGURO SOCIAL)	TELEPHONE NUMBER (OPTIONAL) (TELEFONO) (OPCIONAL) 281 5134	CURRENT PRECINCT NUMBER OR NAME, IF KNOWN: (OPTIONAL) (NUMERO DE PRECINTO O EL NOMBRE DEL SITIO) (OPCIONAL)
--	--	--

THE APPLICANT IS A CITIZEN OF THE UNITED STATES AND A RESIDENT OF THIS COUNTY. I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT. I UNDERSTAND THAT THE GIVING OF FALSE INFORMATION TO PROCURE THE REGISTRATION OF A VOTER IS A FELONY.  
(El solicitante es ciudadano estadounidense y residente de este condado. Afirmando que la información proporcionada es verdadera. Comprendo que es un delito de proporcionar información falsa para tratar la registración de votante.)

SIGNATURE OF APPLICANT (OR AGENT) (FIRMA DE SOLICITANTE O AGENTE) Jose Noyola Jr (Husband)	FOR AGENT: (PARA AGENTE) Agent may be any agent who must be a qualified voter of this county and must be the applicant's husband, wife, father, mother, son, or daughter. (La solicitud puede efectuarse con la ayuda de un votante calificado en el condado que sea uno de los siguientes: esposo, esposa, padre, madre, hijo, o hija.) I AM THE _____ OF THE APPLICANT. (Yo soy el/la) (relación) (relación) (del solicitante)
--	---

FOR WITNESS:  
(PARA TESTIGO)  
If the applicant is unable to sign his name, he shall make his mark in the presence of a witness. If the applicant is unable to make his mark, the witness shall state that fact on the application.  
(Si el solicitante no puede firmar su nombre, debe hacer su marca en la presencia de un testigo. Si el solicitante no puede hacer su marca, el testigo debe declarar la razón sobre la solicitud.)  
Signature and address of witness:  
(Firma y dirección del testigo:)

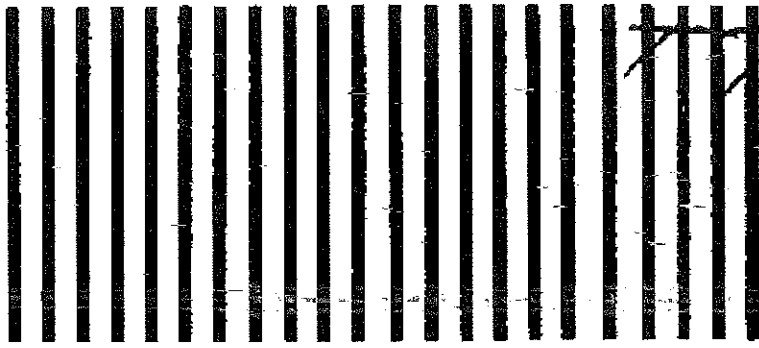
\*The disclosure of social security number is voluntary. It is solicited by authority of Article 5.13b, V.T.E.C. and will be used only to maintain the accuracy of the registration records.  
(La revelación de su número de seguro social es totalmente voluntario. Su número es solicitado por autoridad de Artículo 5.13b, V.T.E.C., y será utilizado únicamente para preservar la exactitud de los archivos de registración.)

For Assistance Call  
*Si Necesita Asistencia*  
Secretary of State's  
*Llame Gratis Al:*  
Office Toll Free:  
1-800-252-9602



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REGISTRAR OF VOTERS  
COUNTY COURTHOUSE

5861 6 1 1100 CHECKED JUN 19 1985 TX \_\_\_\_\_ Zip Code

ENTERED OCT 07 1984



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 9th day of February, 2017

1053149289

ABIGAIL NOYOLA  
1607 HOOPER AVE  
SAN JUAN TX 78589

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 039 DATE OF RECORD: 09/03/2008

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
09/13/2003	2003 GENERAL		P

SIGNED:





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

August 31, 2016

MARIA IMELDA OZUNA  
1008 N 19TH ST  
MCALLEN TX 78501

VUID: 1055045350

Idnumber: 484155

Notice #: N2443952



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-12 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rel\_2s  
150721

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

Additional Information

*sem*

For Official Use Only

Cert. Num.

*606*

*484/55*  
BDR

Last Name (Apellido usual)  
**OZUNA**

First Name (NOT HUSBAND'S) (Su nombre de pila) (Siendo mujer: no el del esposo)  
**MARIA**

Middle / Maiden Name (if any) (Segundo Nombre / Apellido de Soltera (si tiene))  
**IMELDA**

Former Name (Nombre anterior)

Residence Address: Street Address and Apartment Number, City, State, and ZIP. IF none, describe where you live. (Do not include P.O. Box or Rural Rt.) (Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)  
**1008 NORTH 19TH ST, MCALLEN, TX 785010000, HIDALGO**

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarte correspondencia a domicilio.)

Gender (Optional) (Sexo) (Opativo)  
 Male (Hombre)  Female (Mujer)

Date of Birth: month, day, year (Fecha de Nacimiento) (mes, día, año)  
[REDACTED]

City, County, and State of Former Residence (Ciudad, Condado, Estado de su residencia anterior)

Social Security No. (Optional) (Número de Seguro Social) (opativo)

Check appropriate box: I AM A UNITED STATES CITIZEN (Marque el cuadro apropiado: Soy Ciudadano / a de los Estados Unidos)  Yes (Si)  No (No)

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Texas) (opativo)  
[REDACTED]

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

Telephone Number (Optional) (Número telefónico) (opativo)

I affirm that **RECEIVED MAR 14 2004** (que soy)  
• am a resident of this county; (residente del condado)  
• have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)  
• have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial.)

Check one (Marque el cuadro)  
 New (Nuevo)  Change (Cambiar)  Replacement (Reemplazar)

*X Imelda Ozuna*  
Date (fecha)  
**03 12 2004**

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

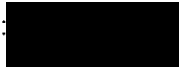
**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1055045350

MARIA IMELDA OZUNA  
1008 N 19TH ST  
MCALLEN TX 78501

BIRTHDATE:



CURRENT PRECINCT: 066

DATE OF RECORD: 01/01/2006

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

April 22, 2016

YADIRA Y RANGEL  
6301 S SOL BRILLA LN  
PHARR TX 78577

VOID: 1186656397

Idnumber: 10091527

Notice #: N2438430



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12138-141 NCTZ

n\_ref\_2a  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1186656397

YADIRA Y RANGEL  
6301 S SOL BRILLA LN  
PHARR TX 78577

BIRTHDATE



CURRENT PRECINCT: 227

DATE OF RECORD: 05/29/2012

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



ELECTIONS DEPARTMENT  
County of Hidalgo

August 31, 2016

LUIS MIGUEL VASQUEZ  
220 E LETICIA ST  
SAN JUAN TX 78589

VOID: 1055490602

Idnumber: 367401

Notice #: N2443955



NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP  
AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12206-40 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

n\_rel\_2s  
150721

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only  
PCT 3074 01  
Reg. Num. EDR

<b>Last Name</b> (Apellido usual) <b>VASQUEZ</b>	<b>First Name (NOT HUSBAND'S)</b> (Su nombre de pifa) (Siendo mujer: no el del esposo) <b>LUIS</b>	<b>Middle Name (If any)</b> (Segundo Nombre) (si tiene) <b>MIGUEL</b>	<b>Former Name</b> (Nombre anterior)
--	--	---	---

**Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)**  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

**220 E LETICIA ST, SAN JUAN, TX 785890000**

<b>Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address.</b> (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)	<b>Gender (Optional)</b> (Sexo) (Optativo) <input type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
--	---

<b>Date of Birth: month, day, year</b> (Fecha de Nacimiento): (mes, día, año) [REDACTED]	<b>City, County, and State of Former Residence</b> (Ciudad, Condado, Estado de su residencia anterior)	<b>Social Security No. (Optional)</b> (Número de Seguro Social) (optativo)
--	---	--

**Check appropriate box: I am a United States Citizen**  Yes (Sí)  No (No)  
(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos)

**TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional)** (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas) (optativo)

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.** (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

**Telephone Number (Optional)** (Número telefónico) (optativo)

**I affirm that I** (Declaro que soy)

- **am a resident of this county;** (residente del condado)
- **have not been finally convicted of a felony or if a felon I am eligible for registration under Section 13.001, Election Code; and**

(que no he sido condenado/a por un delito penal en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)

- **have not been declared mentally incompetent by final judgment of a court of law.**

(no se me ha declarado mentalmente incapacitado por orden judicial.)

**06/11/1997**

Date (fecha)

**RECEIVED JUN 17 1997 X**

*Luis Vasquez*

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.** (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)



# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

For Official Use Only  
PCT Gen. No.

3004

01 EDR

<b>Last Name</b> (Apellido usual) <b>VASQUEZ</b>	<b>First Name (NOT HUSBAND'S)</b> (Su nombre de pila) (Siendo mujer: no el del esposo) <b>LUIS</b>	<b>Middle Name (If any)</b> (Segundo Nombre) (si tiene) <b>MIGUEL</b>	<b>Former Name</b> (Nombre anterior)
--	--	---	---

**Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)**  
(Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Código Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

**220 E LETICIA ST, SAN JUAN, TX 785890000**

<b>Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address.</b> (Dirección postal, Ciudad, Estado y Código Postal) (Si es imposible entregarle correspondencia a domicilio.)	<b>Gender (Optional)</b> (Sexo) (Opcativo) <input type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
--	---

<b>Date of Birth: month, day, year</b> (Fecha de Nacimiento): (mes, día, año) [REDACTED]	<b>City, County, and State of Former Residence</b> (Ciudad, Condado, Estado de su residencia anterior)	<b>Social Security No. (Optional)</b> (Número de Seguro Social) (opcativo)
--	---	--

**Check appropriate box: I am a United States Citizen**  Yes (Sí)  No (No)  
(Marque el cuadro apropiado: Soy Ciudadano/a de los Estados Unidos)

**TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional)** (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas) (opcativo)

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.** (Entiendo que el hecho de proporcionar datos falsos a fin de obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

**Telephone Number (Optional)** (Número telefónico) (opcativo)

- I affirm that I** (Declaro que soy)
- **am a resident of this county;** (residente del condado)
  - **have not been finally convicted of a felony or if a felon I am eligible for registration under Section 13.001, Election Code; and**  
(que no he sido condenado por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
  - **have not been declared mentally incompetent by final judgment of a court of law.**  
(no se me ha declarado mentalmente incapacitado por orden judicial.)

**06/11/1997**  
Date (fecha)

**RECEIVED JUN 17 1997**

**Luis Vasquez**

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.** (Firma del/de la solicitante o de su apoderado/a y qué parentesco tiene el/la apoderado con el/la solicitante. Si la firma es de un/a testigo, escriba el nombre del/de la solicitante usando letra de molde y ponga la fecha.)



**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1055490602

LUIS MIGUEL VASQUEZ  
220 E LETICIA ST  
SAN JUAN TX 78589

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 117 DATE OF RECORD: 02/09/2012

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



**ELECTIONS DEPARTMENT**  
County of Hidalgo

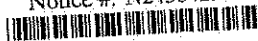
April 22, 2016

EDELMIRO VELA JR  
217 ERMA AVE  
MISSION TX 78572

VOID: 1054221299

Idnumber: 342521

Notice #: N2438429



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpó de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberán ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 días a partir de la fecha de este aviso, su inscripción electoral será cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO

12138-107 NCTZ

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

150

VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

94 For Official Use Only Cert. Num. 312521 EDR

Last Name (Apellido usual) vela; First Name (NOT HUSBAND'S) (Su nombre de pila) (Siendo mujer: no el del esposo) Edelmiro Jr.; Middle Name (if any) (Segundo nombre) (si tiene); Former Name (Nombre anterior) Edelmiro V.

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include PO Box or Rural Rt.) (Domicilio: Calle y número, número de apartamento, Ciudad, Estado, y Zona Postal; A falta de estos datos, describa la localidad de su residencia.) (No incluya su apartado postal ni su ruta rural.)

217 Erma Mission TX 78572

Mailing Address, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección postal, Ciudad, Estado y código postal) (Si es imposible entregarle correspondencia a domicilio.)

217 Erma Mission TX. 78572

Gender (Optional) (Sexo) (Facultativo) Male (Hombre) [checked] Female (Mujer) [ ]

Date of Birth: month, day, year (el día, el año); City and County of Former Residence (Condado y dirección de su residencia anterior)

Social Security No. (Optional) (Número de Seguro Social) (facultativo)

Information to procure a voter registration is perjury, and a crime under state and federal law. (Entiendo que el hecho de proporcionar datos falsos a fin obtener inscripción en el registro de votantes, constituye el delito de perjurio o declaración falsa y es una infracción sancionable por ley federal y estatal.)

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Optional) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Tejas) (Facultativo)

I affirm that I (Declaro que soy)

- am a United States citizen; (ciudadano/a de los Estados Unidos)
am a resident of this county; (residente del condado)
have not been finally convicted of a felony or if a felon I am eligible for registration under section 13.001, Election Code; and (que no he sido condenado/a en definitiva por un delito penal, o en caso de tal condena, que estoy habilitado/a para inscribirme, a tenor de lo dispuesto por la sección 13.001 del Código Electoral)
have not been declared mentally incompetent by final judgment of a court of law. (no se me ha declarado mentalmente incapacitado por orden judicial.)

Telephone Number (Optional) (Número telefónico) (Facultativo) 519-02-45

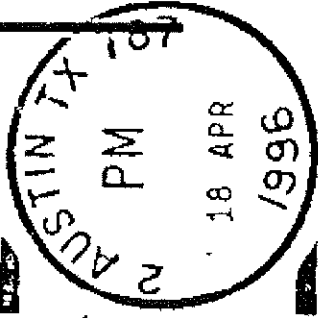
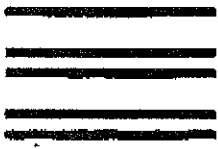
RECOVERED APR 24 1996

4.2.96 Date (fecha)

X Edelmiro vela Jr.

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma del solicitante o de su apoderado/a. Si la firma es de un(a) testigo, escriba el nombre del/de la solicitante en los espacios de molde. Indicar la fecha.)

For Assistance Call  
Si Necesita Asistencia  
Secretary of State's  
Llame Gratis Al:  
Office Toll Free:  
1-800-252-(VOTE) 8683



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS  
COUNTY COURTHOUSE  
(CITY) - *F. W. B. 78539* (ZIP CODE)





**Yvonne Ramón**  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

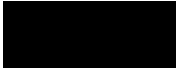
**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 10th day of February, 2017

1054221299

EDELMIRO VELA JR  
217 ERMA AVE  
MISSION TX 78572

BIRTHDATE



CURRENT PRECINCT: 094

DATE OF RECORD: 05/22/2009

\*\*\* NO VOTING HISTORY ON FILE \*\*\*

SIGNED:



Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

April 22, 2016

JUAN VILLALOBOS  
5320 SIERRA DR  
MERCEDOS TX 78570

VUID: 1138924934

Idnumber: 10002307

Notice #: N2438428



**NOTICE TO REGISTERED VOTER FOR PROOF OF CITIZENSHIP**  
**AVISO SOLICITANDO COMPROBANTE DE CIUDADANIA DE VOTANTE INSCRITO**

My office received information that you were excused from jury duty because you were not a U.S. Citizen. You are required to provide proof of citizenship to maintain your registration status. Proof of citizenship must be in a certified form of birth certificate, passport, or citizenship papers. If you fail to provide this proof of citizenship within 30 days from the date of this letter, your voter registration will be cancelled.

Se me ha informado que se le disculpo de prestar servicio como miembro de un jurado debido a que usted no era ciudadano de este país. Si desea que su inscripción electoral se mantenga vigente, debe enviar un comprobante de ciudadanía estadounidense. Estos comprobantes deberan ser formas certificadas bien sea de su acta de nacimiento, pasaporte, o de sus documentos de ciudadanía. Si no prestan dicho comprobante de ciudadanía estadounidense dentro de plazo de 30 dias a partir de la fecha de este aviso, su inscripción electoral sera cancelada.

Signature of Voter Registrar  
Firma del Secretario del Registro Electoral

Yvonne Ramón  
Hidalgo County Elections Administrator

BSAGREDO  
12138-88 NCTZ

a\_rel\_26  
150721

101 South 10th Ave ★ PO Box 659 ★ Edinburg, Texas 78540  
(956) 318-2570 ★ Fax (956) 318-2569 ★ Fax (956) 393-2039 ★ 1-888-653-8683 ★ TDD (956) 381-6829

# VOTER REGISTRATION APPLICATION (SOLICITUD DE INSCRIPCION DE VOTANTE)

N

92  
For Official Use Only

EDR

Last Name (Apellido usual) <b>VILLALOBOS</b>	First Name (Nombre) <b>JUAN</b>	Middle Name (If any) (Segundo Nombre (si hay))	Former Name (Nombre Anterior)
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Residence Address: Street Address and Apartment Number, City, State and Zip. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)  
(Dirección residencial (Domicilio): Calle y número y número de apartamento, Ciudad, Estado y Código Postal. Si falta el CP, describa dónde vive.) (No incluya el apartado postal ni la ruta rural)

**5320 SIERRA DR, MERCEDES, TX 785700000 HIDALGO**

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP: If mail cannot be delivered to your residence address. (Dirección para Correspondencia: Calle y número y número de apartamento, o Apartado Postal, Ciudad, Estado y Código Postal, si es que no se puede entregar correspondencia a su dirección residencial.)	Gender (Optional) (Sexo) (Opcativo) <input checked="" type="checkbox"/> Male (Hombre) <input type="checkbox"/> Female (Mujer)
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Date of Birth: month, day, year (Fecha de nacimiento): (mes, día, año)	If you check 'no' in the response below, do not complete this form. (En caso de dado una respuesta negativa a cualquiera de las preguntas anteriores, no llene el resto del formulario.)
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Check appropriate box: I AM A UNITED STATES CITIZEN  
(Marque el cuadro apropiado: ¿Es usted ciudadano/a de los Estados Unidos?)

Yes (SI)  No (No)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. (Entiendo que el hecho de dar datos falsos con el afán de obtener el registro de votante constituye perjurio, siendo éste un delito a tenor de las leyes federales y estatales. Una condena por dicho delito puede conllevar encarcelamiento por 180 días, una multa hasta de dos mil dólares o ambas sanciones.)

- I affirm that I (Afirmo)
- am a resident of this county; (que soy residente de este condado)
  - have not been finally convicted of a felony or If a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and (que no he sido condenado/a por un delito mayor ("felonía") o, si se me ha condenado por tal delito, he cumplido integralmente la condena correspondiente, incluso cualquier período de reclusión carcelaria, libertad condicional, supervisión, probatoria (sentencia condicional) o que soy beneficiario/a de un indulto; y)
  - have not been declared mentally incompetent by final judgment of a court of law. (que ninguna decisión definitiva de un tribunal me ha declarado mentalmente incapacitado/a.)

REC'D DEC 05 2006

TX Driver's License No. or Personal I.D. No. (Issued by TX Dept. of Public Safety) (Número de su licencia tejana de manejar o de su Cédula de Identidad expedida por el Departamento de Seguridad Pública de Texas)

Are you interested in serving as an election worker? (¿Le interesaría servir de trabajador (a) electoral?)

Yes (SI)  No (No)

Check one (Marque una de las respuestas)

New  Change  Replacement   
Esta es una solicitud (Nueva) (Modificada) (Sustitutiva)

**X Juan Villalobos** 11 29 2006  
Date (fecha)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. (Firma de/de la solicitante o su Agente (apoderado/a) y el parentesco entre los dos o el Nombre en Letras de Molde de/de la Solicitante si la firma es la de un(a) testigo, Indique la fecha.)





Yvonne Ramón  
Elections Administrator

**ELECTIONS DEPARTMENT**  
County of Hidalgo

**HIDALGO COUNTY**  
**VOTING HISTORY RECORD**

The following is the voting history on file in HIDALGO COUNTY  
as of this 9th day of February, 2017

1138924934

JUAN VILLALOBOS  
5320 SIERRA DR  
MERCEDES TX 78570

BIRTHDATE: [REDACTED] CURRENT PRECINCT: 041 DATE OF RECORD: 08/06/2015

<u>Election Date</u>	<u>Description</u>	<u>Party Code</u>	<u>Vote Type</u>
11/02/2010	GENERAL ELECTION		E

SIGNED: