## **AMENDMENT:** APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

## FORM ACTA PG 1

1	CANDIDATE NAME					2 FILER	RID#		3 Total pa	ages filed:
	Use this form	for cha		-			niled instructions. t provide information	on prev	iously dis	sclosed.
4	CANDIDATE NAME	NEW	MS / MRS	/ MR	FIRST		MI		OFFICE U	JSE ONLY
			NICKNAME		LAST		SUFFIX	Date Re	ceived	
5	CANDIDATE MAILING ADDRESS	NEW	ADDRESS	/ PO BOX;	APT / SUITE #;	CITY;	STATE; ZIP CODE	Date Ha	and-delivered or l	Postmarked
								Receipt Date Pro		Amount \$
6	CANDIDATE PHONE	NEW	AREA COI	)	PHONE NUMBER		EXTENSION	Date Im	aged	
7	OFFICE HELD (if any)	NEW								
8	OFFICE SOUGHT (if known)	NEW								
9	CAMPAIGN TREASURER NAME	NEW	MS / MRS	/ MR	FIRST	MI	NICKNAME	LAST		SUFFIX
	CAMPAIGN TREASURER STREET ADDRESS residence or business)	NEW	STREET A	DDRESS (NO	D PO BOX PLEASE);	APT / SUITE #;	CITY;		STATE;	ZIP CODE
11	CAMPAIGN TREASURER PHONE	NEW	AREA COI	)	PHONE NUMBER		EXTENSION			
12	CANDIDATE SIGNATURE	I ar the I ar	n awar Election	re of my on Code e of the	responsibil e.	ity to file	oter 573 of the Te timely reports as of the Election Cons.	requi	ired by ti	tle 15 of
				Signat	ure of Candida	te		Da	ate Signed	
					GO TO	PAGE	2			

## **AMENDMENT**:

## **CANDIDATE MODIFIED REPORTING DECLARATION**

FORM ACTA PG 2

NAME		
COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING  * This declaration must be filed no later than the 30th day before the first election to which the declaration applies. *  * The modified reporting option is valid for one election cycle only. * (An election cycle includes a primary election, a general election, and any related runoffs.)  * Candidates for the office of state chair of a political party may NOT choose modified reporting. *  I do not intend to accept more than \$1,140 in political contributions or make more than \$1,140 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.    Year of election(s) or election cycle to   Signature of Candidate	13 CANDIDATE NAME	
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This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>

or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority DO NOT SEND TO TEC

For more information about where to file go to: https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php