APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

| See CTA Instruction Guide for detailed instructions. | | | | | | | 1 Total pages filed: | |
|--|-------------------------|---|----------------|----------------|-----------------|---------------------|----------------------|--|
| 2 | CANDIDATE | MS/MRS/MR | FIRST | | MI | OFFICE USE ONLY | | |
| | NAME | | | | | Filer ID # | | |
| | | NICKNAME | LAST | | SUFFIX | | | |
| | | | | | | Date Received | | |
| | CANDIDATE | ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; ZIP CODE | - | | |
| 3 | CANDIDATE MAILING | ABBRESS / FO BOX, | 74 17 00112 ", | 0111, | onne, en dobe | | | |
| | ADDRESS | | | | | | | |
| | | | | | | Date Hand-delivered | or Postmarked | |
| 4 | CANDIDATE | AREA CODE | PHONE NUMBER | | EXTENSION | Receipt# | Amount \$ | |
| | PHONE | | | | | | | |
| | | () | | | | Date Processed | | |
| 5 | OFFICE | | | | | Date Imaged | | |
| | HELD (if any) | | | | | | | |
| 6 | OFFICE SOUGHT | | | | | | | |
| | (if known) | | | | | | | |
| 7 | CAMPAIGN TREASURER | MS/MRS/MR | FIRST | MI | NICKNAME | LAST | SUFFIX | |
| | NAME | | | | | | | |
| | | | | | | | | |
| 8 | CAMPAIGN | STREET ADDRESS; | | APT / SUITE #; | CITY; | STATE; | ZIP CODE | |
| | TREASURER STREET | | | | | | | |
| , | ADDRESS | | | | | | | |
| (| (residence or business) | | | | | | | |
| 9 | CAMPAIGN | AREA CODE | PHONE NUMBER | | EXTENSION | | | |
| | TREASURER PHONE | () | | | | | | |
| | | | | | | | | |
| 10 | CANDIDATE | | | | | | | |
| SIGNATURE I am aware of the Nepotism Law, Chapter 573 of the Texas | | | | exas Governn | nent Code. | | | |
| | | | | | | | title 15 of | |
| | | I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. | | | | | uuc 1001 | |
| | | | | | | | | |
| | | I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Signature of Candidate | | | | Date Signed | | |
| | CO TO PACE 2 | | | | | | | |

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA

| 11 CANDIDATE NAME | | | | | | |
|---|---|--|--|--|--|--|
| 12 MODIFIED REPORTING DECLARATION | COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING | | | | | |
| | •• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. •• | | | | | |
| | •• The modified reporting option is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.) | | | | | |
| | Candidates for the office of state or county 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 which declaration applies Signature of Candidate | | | | | |

This appointment is effective on the date it is filed with the appropriate filing authority.

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us

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