

# APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA  
PG 1

**See STA Instruction Guide for detailed instructions.**  
If you are involved in a School District Bond Election, you must file Form STA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.

1 Total pages filed:

2 COMMITTEE NAME							<b>OFFICE USE ONLY</b>	
							Filer ID #	
3 COMMITTEE ADDRESS	ADDRESS / POBOX; APT / SUITE #; CITY; STATE; ZIP CODE						Date Received	
							Date Hand-delivered or Postmarked	
4 CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST		MI		Receipt #	
	NICKNAME		LAST		SUFFIX		Amount \$	
5 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						Date Processed	
							Date Imaged	
6 MAILING ADDRESS  <input type="checkbox"/> same as above	ADDRESS / POBOX; APT / SUITE #; CITY; STATE; ZIP CODE							
7 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION		( )	
8 PERSON APPOINTING TREASURER	FIRST		MI		LAST		SUFFIX	
9 SIGNATURE	<p>I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">Signature of Campaign Treasurer</p>							
10 ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST		MI		LAST		SUFFIX	
11 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / POBOX; APT / SUITE #; CITY; STATE; ZIP CODE							
12 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION		( )	

CONTINUE ON PAGE 2

**SPECIFIC-PURPOSE COMMITTEE:  
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA  
PG 2**

**13** COMMITTEE NAME

**14** COMMITTEE PURPOSE

SUPPORT CANDIDATE

OPPOSE CANDIDATE

ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

SUPPORT MEASURE

OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

ELECTION DATE

Month / Day / Year

DESCRIPTION

**15** 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 declaration is valid for one election cycle only. ••**  
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer 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 Campaign Treasurer

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

TEC Filers may send this form to the TEC electronically at [treasappoint@ethics.state.tx.us](mailto: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:  
<http://204.65.203.6/filinginfo/QuickFileAReport.php>

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