AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM ACTA PG 1

| 1 | CANDIDATE NAME | | | | | 2 FILE | RID# | | | 3 Total p | ages filed: | |
|---|--|---|--------------|----------------------|-------------------|----------------|-----------|-------------|-----------|-----------------|-------------|--|
| See ACTA Instruction Guide for detailed instructions. Use this form for changes to existing information <i>only</i> . Do not provide information previously disclosed. | | | | | | | | | | | | |
| 4 | CANDIDATE NAME | NEW | MS / MRS | / MR | FIRST | | | MI | | OFFICE (| JSE ONLY | |
| | IVAIVIL | | NICKNAMI | E | LAST | | | | Date Rec | reived | | |
| 5 | CANDIDATE MAILING ADDRESS | NEW | ADDRESS | / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE | | nd-delivered or | | |
| | | | | | | | | | Receipt # | " | Amount \$ | |
| 6 | CANDIDATE | NEW | AREA CO | DE | PHONE NUMBER | | EXTENSION | | Date Pro | cessed | | |
| • | PHONE | | (|) | | | | | Date Ima | 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 CO |) | PHONE NUMBER | | EXTENSION | | | | | |
| 12 | CANDIDATE SIGNATURE | I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. | | | | | | | | | | |
| | I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. | | | | | | | | ue 15 0ī | | | |
| | | I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. | | | | | | | | outions | | |
| | | | Signat | gnature of Candidate | | | | Date Signed | | | | |
| | | | | | GO TO | PAGE | 2 | | | | | |

AMENDMENT: CANDIDATE MODIFIED REPORTING DECLARATION

FORM ACTA PG 2

| 3 CANDIDATE NAME | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| 4 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 chair of a political party may NOT choose modified reporting. •• | | | | | | | |
| | I do not intend to accept more than \$1,010 in political contributions or make more than \$1,010 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