

AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A GENERAL-PURPOSE COMMITTEE **FORM AGTA PG 1**

AUSTIN CITY CLERK
POSTING: DATE/TIME

2009 FEB 10 PM 3 02

See AGTA INSTRUCTION GUIDE for detailed instructions.		1	TOTAL PAGES FILED:	OFFICE USE ONLY	
2	COMMITTEE NAME	3	ACCOUNT#	Date Received	
	AUSTIN BOARD OF REALTORS PAC		00035370		
4	COMMITTEE NAME	NEW			
5	ACRONYM	NEW			
6	COMMITTEE ADDRESS	NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked	
	10900 STONELAKE BLVD STE#100 AUSTIN TX 78759			Receipt #	Amount
7	REPORTING TYPE	NEW	<input type="checkbox"/> REGULAR <input type="checkbox"/> MONTHLY	Date Processed	
				Date Image	
8	CAMPAIGN TREASURER NAME	NEW	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX		
	MRS. CINDY L. STALLINGS				
9	CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	NEW	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #; CITY; STATE; ZIP CODE		
	10900 STONELAKE BLVD STE#100 AUSTIN TX 78759				
10	CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> same as above	NEW	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE; ZIP CODE		
	10900 STONELAKE BLVD STE#100 AUSTIN TX 78759				
11	CAMPAIGN TREASURER PHONE	NEW	AREA CODE PHONE NUMBER EXTENSION		
	(512) 454-7636				
12	PERSON APPOINTING TREASURER		FIRST MI LAST SUFFIX		
	DAVID M. FOSTER PRESIDENT/CEO				
13	SIGNATURE	I understand that I have been appointed as the campaign treasurer for this general-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.			
	<u>Cindy L. Stallings</u> Signature of campaign treasurer				
14	ASSISTANT CAMPAIGN TREASURER	NEW	FIRST MI LAST SUFFIX		
15	ASSISTANT CAMPAIGN TREASURER ADDRESS	NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
16	ASSISTANT CAMPAIGN TREASURER PHONE	NEW	AREA CODE PHONE NUMBER EXTENSION		
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CONTINUE ON PAGE 2

This appointment is effective on the date it is filed with the commission.

AMENDMENT: GENERAL-PURPOSE COMMITTEE CONTROLLING ENTITY INFORMATION

FORM AGTA
PG 2

17	COMMITTEE NAME	18	ACCOUNT #
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19 CONTROLLING ENTITY INFORMATION	<input type="checkbox"/> add <input type="checkbox"/> delete	FULL NAME OF CONTROLLING ENTITY
		ACRONYM
	<input type="checkbox"/> add <input type="checkbox"/> delete	FULL NAME OF CONTROLLING ENTITY
		ACRONYM
<input type="checkbox"/> add <input type="checkbox"/> delete	FULL NAME OF CONTROLLING ENTITY	
	ACRONYM	
<input type="checkbox"/> add <input type="checkbox"/> delete	FULL NAME OF CONTROLLING ENTITY	
	ACRONYM	

20 CONTRIBUTION DECISION MAKERS	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix
	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix
	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix

21 EXPENDITURE DECISION MAKERS	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix
	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix
	<input type="checkbox"/> add <input type="checkbox"/> delete	First	MI	Last	Suffix
		First	MI	Last	Suffix

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

GENERAL-PURPOSE COMMITTEE: RECIPIENT COMMITTEES

FORM AGTA
PG 3

22 COMMITTEE NAME

23 ACCOUNT #

24
RECIPIENT
GENERAL
PURPOSE
COMMITTEES

ADD	Committee name
	Committee address; City; State; Zip Code

ADD	Committee name
	Committee address; City; State; Zip Code

ADD	Committee name
	Committee address; City; State; Zip Code

ADD	Committee name
	Committee address; City; State; Zip Code

ADD	Committee name
	Committee address; City; State; Zip Code

ADD	Committee name
	Committee address; City; State; Zip Code

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	Committee address; City; State; Zip Code

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