

# 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 NAME  | MS / MRS / MR   | FIRST          | MI        | OFFICE USE ONLY |               |                                   |             |
|   | NICKNAME  | LAST           | SUFFIX    | Filer ID #      | Date Received |                                   |             |
| 3 CANDIDATE MAILING ADDRESS                                 | ADDRESS / PO BOX;   | APT / SUITE #; | CITY;     | STATE;          | ZIP CODE      | Date Hand-delivered or Postmarked |             |
| 4 CANDIDATE PHONE   | AREA CODE   | PHONE NUMBER   | EXTENSION | Receipt #       | Amount \$     | Date Processed                    |             |
| 5 OFFICE HELD (if any)                                      |   |                |           |                 |               |                                   | Date Imaged |
| 6 OFFICE SOUGHT (if known)                                  | Mayor of Austin   |                |           |                 |               |                                   |             |
| 7 CAMPAIGN TREASURER NAME                                   | MS/MRS/MR   | FIRST          | MI        | NICKNAME        | LAST          | SUFFIX                            |             |
| 8 CAMPAIGN TREASURER STREET ADDRESS (residence or business) | STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #; | CITY;     | STATE;          | ZIP CODE      |                                   |             |
| 9 CAMPAIGN TREASURER PHONE                                  | AREA CODE   | PHONE NUMBER   | EXTENSION |                 |               |                                   |             |
| 10 CANDIDATE SIGNATURE                                      | <p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p><u>Laura Morrison</u>                      <u>1/8/18</u><br/>Signature of Candidate                      Date Signed</p> |                |           |                 |               |                                   |             |

GO TO PAGE 2

# CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA  
PG 2

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 chair of a political party  
may NOT choose modified reporting. \*\***

I do 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.  
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](mailto:treasappoint@ethics.state.tx.us) or

Fax this form to (512) 463-8808 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/whatsnew/NewFilersGettingStarted.html>