

**AMENDMENT: APPOINTMENT OF A  
CAMPAIGN TREASURER BY A CANDIDATE**

**FORM ACTA  
PG 1**

1 CANDIDATE NAME <i>Robert "Bobby" Leviniski</i>	2 FILER ID#	3 Total pages filed: <i>2</i>
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See ACTA Instruction Guide for detailed instructions.  
Use this form for changes to existing information only. Do not provide information previously disclosed.

4 CANDIDATE NAME	<table border="1"> <tr> <td>NEW</td> <td>MS / MRS / MR</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td><i>Mr</i></td> <td><i>Robert</i></td> <td><i>J</i></td> </tr> <tr> <td></td> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td><i>Bobby</i></td> <td><i>Leviniski</i></td> <td></td> </tr> </table>	NEW	MS / MRS / MR	FIRST	MI		<i>Mr</i>	<i>Robert</i>	<i>J</i>		NICKNAME	LAST	SUFFIX		<i>Bobby</i>	<i>Leviniski</i>		<table border="1"> <tr> <th colspan="2">OFFICE USE ONLY</th> </tr> <tr> <td colspan="2">Date Received</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>DCC RECEIVED AT SEP 4 '18 PM 3:53</b></td> </tr> <tr> <td colspan="2">Date Hand-delivered or Postmarked</td> </tr> <tr> <td>Receipt #</td> <td>Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>	OFFICE USE ONLY		Date Received		<b>DCC RECEIVED AT SEP 4 '18 PM 3:53</b>		Date Hand-delivered or Postmarked		Receipt #	Amount \$	Date Processed		Date Imaged	
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7 OFFICE HELD (if any)	NEW
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8 OFFICE SOUGHT (if known)	NEW <i>Austin City Council, District 8</i>
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9 CAMPAIGN TREASURER NAME	<table border="1"> <tr> <td>NEW</td> <td>MS / MRS / MR</td> <td>FIRST</td> <td>MI</td> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td><i>Ms</i></td> <td><i>Cynthia</i></td> <td></td> <td><i>Mindy</i></td> <td><i>Sutton</i></td> <td></td> </tr> </table>	NEW	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX		<i>Ms</i>	<i>Cynthia</i>		<i>Mindy</i>	<i>Sutton</i>	
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10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	<table border="1"> <tr> <td>NEW</td> <td>STREET ADDRESS (NO PO BOX PLEASE):</td> <td>APT / SUITE #:</td> <td>CITY:</td> <td>STATE:</td> <td>ZIP CODE</td> </tr> <tr> <td></td> <td colspan="5"><i>5001 Wing Rd Austin, TX 78749</i></td> </tr> </table>	NEW	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE		<i>5001 Wing Rd Austin, TX 78749</i>				
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12 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 style="text-align: center;">               _____              Signature of Candidate         </p> <p style="text-align: right;"> <i>9/4/18</i>              _____              Date Signed         </p>
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**AMENDMENT:**  
**CANDIDATE MODIFIED REPORTING DECLARATION**

**FORM ACTA**  
**PG 2**

13 CANDIDATE  
NAME

14 MODIFIED  
REPORTING  
DECLARATION

NEW

**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>