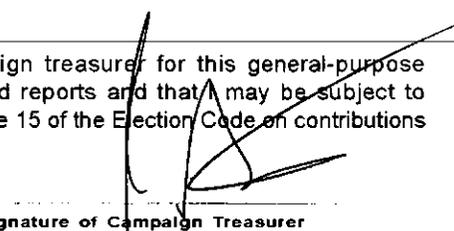


APPOINTMENT OF A CAMPAIGN TREASURER BY A GENERAL-PURPOSE COMMITTEE

FORM GTA
PG 1

See GTA Instruction Guide for detailed instructions.		1 Total pages filed:				
2 COMMITTEE NAME	AUSTINITES FOR AFFORDABILITY		OFFICE USE ONLY Filer ID # Date Received OCC RECEIVED AT SEP 5 '18 PM 4:33 Date Processed Receipt # Amount \$ Date Processed Date Imaged			
3 ACRONYM						
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 90591 AUSITN, TX 78709					
5 REPORTING TYPE	<input type="checkbox"/> REGULAR <input type="checkbox"/> MONTHLY					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
	MR.	JOSEPH			MARTINEZ	
7 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE	
	11121 AVERY STATION LOOP #21		AUSTIN	TX	78717	
8 CAMPAIGN TREASURER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
	<input checked="" type="checkbox"/> same as above					
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		
	(512)	761-2278				
10 PERSON APPOINTING TREASURER	FIRST	MI	LAST	SUFFIX		
	N/A					
11 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.					
	 Signature of Campaign Treasurer					
12 ASSISTANT CAMPAIGN TREASURER	FIRST	MI	LAST	SUFFIX		
	N/A					
13 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
	N/A					
14 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		
	(N/A)					

CONTINUE ON PAGE 2

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

**GENERAL-PURPOSE COMMITTEE:
CONTROLLING ENTITY INFORMATION**

15 COMMITTEE NAME AUSTINITES FOR AFFORDABILITY

16 CONTROLLING ENTITY INFORMATION	FULL NAME OF CONTROLLING ENTITY N/A
	ACRONYM
	FULL NAME OF CONTROLLING ENTITY
	ACRONYM
FULL NAME OF CONTROLLING ENTITY	
ACRONYM	
FULL NAME OF CONTROLLING ENTITY	
ACRONYM	

17 CONTRIBUTION DECISION MAKERS	First MI Last Suffix JOSEPH MARTINEZ
	First MI Last Suffix

18 EXPENDITURE DECISION MAKERS	First MI Last Suffix JOSEPH MARTINEZ
	First MI Last Suffix

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**GENERAL-PURPOSE COMMITTEE:
RECIPIENT COMMITTEES**

**FORM GTA
PG 3**

19 COMMITTEE NAME AUSTINITES FOR AFFORDABILITY

20 RECIPIENT GENERAL PURPOSE COMMITTEES

Committee name
N/A

Committee address; City; State; Zip Code

Committee name

Committee address; City; State; Zip Code

Committee name

Committee address; City; State; Zip Code

Committee name

Committee address; City; State; Zip Code

Committee name

Committee address; City; State; Zip Code

Filers may send this form to the TEC electronically at 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

For more information about where to file go to:
<https://www.ethics.state.tx.us/whatsnew/NewFilersGettingStarted.html>

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED