lf	you are involved in a Sch	STA Instruction Guide for detailed instructions. Nool District Bond Election, you must file Form STA with the local filing authority sending a file-stamped copy to the Texas Ethics Commission.	1 Total pages filed:
2	COMMITTEE NAME	OUR TOWN AUSTIN	OFFICE USE ONLY
3	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2900 W. ANDERSON LANE LZOO #132 AUSTIN, TEXAS 78757	
4	CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI SHARON BLYTHE NICKNAME LAST SUFFIX	OCT 21 '19 PM4: Date Hand-delivered or Postmarked
5	CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE 9206 BRIGADOON COUE AUSTINITELAS 78750	Receipt # Amount \$ Date Processed Date Imaged
6	MAILING ADDRESS Same as above	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 789-6152	
8	PERSON APPOINTING TREASURER	FIRST MI LAST SHARON BLYTHE	SUFFIX
9	SIGNATURE	I understand that I have been appointed as the campaign treat committee and that I am responsible for filing all required report fines for failure to do so. I am aware of the restrictions in title 15 of the from corporations and labor organizations.	ts and that I may be subject to
0	ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST MI LAST	SUFFIX
_	ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
1		AREA CODE PHONE NUMBER EXTENSION	

Forms provided by Texas Ethics Commission

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SPECIFIC-PURPOSE COMMITTEE: PURPOSE AND MODIFIED REPORTING DECLARATION

13 COMMITTEE NAME OUR Town AUSTIN 14 COMMITTEE PURPOSE CANDIANE □ SUPPORT CANDIATE OFFICE SOUGHT (candidate) / OFFICE HELD (afficientidate) □ OFFOSE CANDIATE OFFICE SOUGHT (candidate) / OFFICE HELD (afficientidate) □ OFFOSE CANDIATE OFFICE SOUGHT (candidate) / OFFICE HELD (afficientidate) □ OFFOSE CANDIATE OFFICE SOUGHT (candidate) / OFFICE HELD (afficientidate) □ OFFOSE MEASURE OFFICE SOUGHT (candidate) / OFFICE HELD (afficientidate) □ OFFOSE MEASURE DESCRIPTION TRECALL (MAYOR STEPHEN APLEAC, RECALL CIN DISTRICT MATASHA #ARREPMEO RECALL CIN DISTRICT & PAILE (LUS RECALL CIN DISTRICT MATASHA #ARREPMEO RECALL CIN DISTRICT & PAILE (LUS RECALL CIN DISTRICT MATASHA #ARREPMEO 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 declaration is valid for one election cycle only. ** (An election cycle includes a primary election, a general election, and any related runoffs.) The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political contributions or make more than \$500 in political contributions or make more than \$500 in political contributions or election cycle to which declaration applies TEC Filers may send this form to the TEC electron				
14 COMMITTEE CANDIDATE/OFFICEHOLDER NAME □ SUPPORT CANDIDATE OFFICE SOUCHT (candidate) / OFFICE HELD (officeHolder) □ ASSIST OFFICEHOLDER BALLOT IDENTIFICATION OF MEASURE / # □ OPPOSE MEASURE BALLOT IDENTIFICATION OF MEASURE / # □ OPPOSE MEASURE BALLOT IDENTIFICATION OF MEASURE / # □ OPPOSE MEASURE BALLOT IDENTIFICATION OF MEASURE / # □ OPPOSE MEASURE BESCRIPTION 'RC'CALL' (M AND'A STEPHEN' ADL'6Z', RECALL CL MOSTAL CT & AND'A KITCH CAR RECALL CL MOSTAL T& BALLO 'PON' REV'EALL, RECALL CL MOSTAL T & AND KITCH CAR RECALL CL MOSTAL T& BALLO 'PON' REV'EALL, RECALL CL MOSTAL T & AND KITCH CAR RECALL CL MOSTAL T& BALLO 'PON' REV'EALL, RECALL CL MOSTAL T & AND KITCH CAR RECALL CL MOSTAL T& BALLO 'PON' REV'EALL, RECALL CL MOSTAL T & AND KITCH CAR RECALL CL MOSTAL T& BALLO 'PON' REV'EALL, RECALL CL MOSTAL T & KATHIE TOUO. 15 MODIFIED REPORTING DECLARATION COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING. •**The modified reporting declaration is valid for one election cycle only. ** (An election cycle includes a primary election, and any related runoffs.) The committee does 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. The committee's claration applies 'Year of election(s) or election cycle to which declaration applies Signature of Campaign Treasurer 'Year of election(s) or election cycle to which declaration applies				
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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://ethics.state.tx.us/filinginfo/QuickFileAReport.php				
This appointment is effective on the date it is filed with the appropriate filing authority.				
CONTINUE ON PAGE 3				

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SPECIFIC-PURPOSE COMMITTEE:FORM STASTATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURESPG 3FROM CORPORATION OR LABOR ORGANIZATION POLITICALPG 3CONTRIBUTIONS UNDER SECTION 252.0031, ELECTION CODEPG 3				
16 COMMITTEE NAME OUR TOWN AUSTIN				
17 AFFIRMATION (If applicable) I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct:				
The political committee named above is not established or controlled by a candidate or an officeholder, and will not use any political contribution from a corporation or a labor organization to make a political contribution to: (1) a candidate for elective office or an officeholder, or (2) a political committee that has not included in its campaign treasurer appointment a Statement Authorizing Direct Campaign Expenditures from Corporation or Labor Organization Political Contributions declaring the same.				
PLEASE COMPLETE EITHER OPTION (1) OR (2) BELOW:				
(1) Affidavit Jurat: THOMAS A. GRAUZER Notary Public, State of Texas Comm. Expires 11-19-2022 Noriginal Starthol Steal D 12169707				
Sworn to and subscribed before me by <u>sharon Firm Blyth</u> , this the <u>2/5</u> day of <u>Ocycber</u> , 20_6, to certify which, witness my hand and seal of office.				
Thoma kayns Thomas A. Grauser Notar public				
Signature of officer administering oath Printed Name of officer administering oath Title of officer administering oath				
2) Unsworn Declaration Jurat:				
My name is, and my date of birth is				
My Address is,,,,,,,,,,,				
Executed in County, State of, on the day of, 20				
Signature of Committee Representative (Declarant)				
Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us Ethics Commission, P.O. Box 12070, Austin, TX 78711-2070Non-TEC Filers must file this form with the local filing authority				

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