

APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA
PG 1

See STA Instruction Guide for detailed instructions. If you are involved in a School District Bond Election, you must file Form STA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.		1 Total pages filed: <div style="font-size: 2em; color: blue; margin-left: 100px;">3</div>									
2 COMMITTEE NAME	Mobility for All										
3 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3110 Manor Road Suite H Austin, Texas 78723										
4 CAMPAIGN TREASURER NAME	<table style="width: 100%; border: none;"> <tr> <td style="width: 20%;">MS / MRS / MR Dr.</td> <td style="width: 40%;">FIRST Colette</td> <td style="width: 20%;">MI</td> <td style="width: 20%;"></td> </tr> <tr> <td>NICKNAME</td> <td>LAST Pierce Burnette</td> <td>SUFFIX</td> <td></td> </tr> </table>			MS / MRS / MR Dr.	FIRST Colette	MI		NICKNAME	LAST Pierce Burnette	SUFFIX	
MS / MRS / MR Dr.	FIRST Colette	MI									
NICKNAME	LAST Pierce Burnette	SUFFIX									
5 CAMPAIGN TREASURER STREET ADDRESS <small>(residence or business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 801 W 5th Street Apt 1903 Austin, TX 78703										
<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Filer ID # Date Received <div style="text-align: center; margin-top: 10px;"> OCC RECEIVED AT JUL 24 '20 AM 10:32 </div> </div>											
Date Hand-delivered or Postmarked											
Receipt #		Amount \$									
Date Processed											
Date Imaged											
6 MAILING ADDRESS <input type="checkbox"/> same as above	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 481-2505										
8 PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX										
9 SIGNATURE	<p>I understand that I have been appointed as the campaign treasurer for this specific-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.</p> <div style="text-align: right; margin-top: 20px;"> Signature of Campaign Treasurer </div>										
10 ASSISTANT CAMPAIGN TREASURER <small>(see instructions)</small>	FIRST MI LAST SUFFIX										
11 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE										
12 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ()										
CONTINUE ON PAGE 2											

**SPECIFIC-PURPOSE COMMITTEE:
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA
PG 2**

13 COMMITTEE NAME

Mobility for All

**14 COMMITTEE
PURPOSE**

☐ SUPPORT CANDIDATE

☐ OPPOSE CANDIDATE

☐ ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

☒ SUPPORT MEASURE

☐ OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

To Be Determined

ELECTION DATE

Month Day Year
11/03/2020

DESCRIPTION

Transit ballot measure

**15 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 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 \$900 in political contributions or make more than \$900 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer 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 Campaign Treasurer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us

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/filinginfo/QuickFileARepor.php>

This appointment is effective on the date it is filed with the appropriate filing authority.

SPECIFIC-PURPOSE COMMITTEE:**FORM STA****STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES
FROM CORPORATION OR LABOR ORGANIZATION POLITICAL
CONTRIBUTIONS UNDER SECTION 252.0031, ELECTION CODE****PG 3****16 COMMITTEE
NAME****17 AFFIRMATION
(If applicable)**

I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct:

(Check if
applicable)

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:**_____
Signature of Committee Representative

Notary Stamp/Seal

Sworn to and subscribed before me by _____, this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed Name of officer administering oath

Title of officer administering oath

OR

2) Unsworn Declaration Jurat:My name is Laura Hernandez, and my date of birth is 12/17/1985.My Address is 6000 Lonesome Valley Trail, Austin, Texas, 78731, United States
(street) (city) (state) (zip code) (country)Executed in Travis County, State of Texas, on the 23rd day of July, 2020._____
Signature of Committee Representative (Declarant)

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treasappoint@ethics.state.tx.us or by mail to: Texas
Ethics Commission, P.O. Box 12070, Austin, TX 78711-2070

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