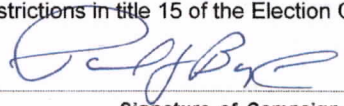


APPOINTMENT OF A CAMPAIGN TREASURER BY A GENERAL-PURPOSE COMMITTEE

FORM **GTA**
PG 1

See GTA Instruction Guide for detailed instructions.		1 Total pages filed: 4	
2 COMMITTEE NAME	SafeTX Political Action Committee		OFFICE USE ONLY Filer ID # Date Received OCC RECEIVED AT OCT 12 '20 AM 11:19 Date Hand-Delivered or Postmarked Receipt # Amount \$ Date Processed Date Imaged
3 ACRONYM	SafeTX PAC		
4 COMMITTEE ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 815 Brazos Street, Ste. 701, Austin, Texas 78701		
5 REPORTING TYPE	<input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> MONTHLY		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX Mr. Paul J. Bury III		
7 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 815 Brazos Street, Ste. 701, Austin, Texas 78701		
8 CAMPAIGN TREASURER MAILING ADDRESS <input checked="" type="checkbox"/> same as above	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 482-8107		
10 PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX Paul J. Bury III		
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		
13 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
14 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ()		

CONTINUE ON PAGE 2

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

GENERAL-PURPOSE COMMITTEE: CONTROLLING ENTITY INFORMATION

FORM **GTA**
PG **2**

15 COMMITTEE NAME	SafeTX Political Action Committee			
16 CONTROLLING ENTITY INFORMATION	FULL NAME OF CONTROLLING ENTITY SafeTX 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
	First	MI	Last	Suffix
	First	MI	Last	Suffix
	First	MI	Last	Suffix
	First	MI	Last	Suffix
18 EXPENDITURE DECISION MAKERS	First	MI	Last	Suffix
	First	MI	Last	Suffix
	First	MI	Last	Suffix
	First	MI	Last	Suffix
	First	MI	Last	Suffix

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

GENERAL-PURPOSE COMMITTEE:
RECIPIENT COMMITTEES

FORM GTA
PG 3

19 COMMITTEE
NAME SafeTX Political Action Committee

20 RECIPIENT
GENERAL
PURPOSE
COMMITTEES

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

Committee name

Committee address; City; State; Zip Code

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

For more information about where to file go to:
<https://ethics.state.tx.us/filinginfo/QuickFileAReport.php>

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

GENERAL-PURPOSE COMMITTEE:FORM **GTA****STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES
FROM CORPORATION OR LABOR ORGANIZATION POLITICAL
CONTRIBUTIONS UNDER SECTION 252.003, ELECTION CODE**PG **4****21 COMMITTEE NAME** SafeTX Political Action Committee**22 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 PAUL J BURY III, and my date of birth is _____.My Address is 815 BRAZOS STE 701, AUSTIN, TX, 78701, USA
(street) (city) (state) (zip code) (country)Executed in TRAVIS County, State of TX, on the 5 day of OCTOBER, 2020.[Signature]
Signature of Committee Representative (Declarant)Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us or by mail to:

Texas Ethics Commission, P.O. Box 12070, Austin, TX 78711-2070