


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	Save Austin Now Candidate Support PAC		OFFICE USE ONLY Filer ID # Date Received OCC RECEIVED AT JAN 13 '22 AM 11:01 Date Hand-delivered or Postmarked Receipt # Amount \$ Date Processed Date Imaged
3 ACRONYM	SANCS PAC		
4 COMMITTEE ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 807 Brazos Street, Suite 202, Austin, TX 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. Logan Cheney		
7 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS: APT / SUITE #: CITY: STATE: ZIP CODE 807 Brazos Street, Suite 202, Austin, TX 78701		
8 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> same as above	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 8873540		
10 PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX		
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 ()		

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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

16 CONTROLLING
ENTITY
INFORMATION

FULL NAME OF CONTROLLING ENTITY

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

CONTINUE ON PAGE 3

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**GENERAL-PURPOSE COMMITTEE:
RECIPIENT COMMITTEES**

**FORM GTA
PG 3**

19 COMMITTEE
NAME

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

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

**CONTINUE ON PAGE 4
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

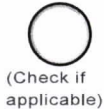
GENERAL-PURPOSE COMMITTEE:
STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES
FROM CORPORATION OR LABOR ORGANIZATION POLITICAL
CONTRIBUTIONS UNDER SECTION 252.003, ELECTION CODE

FORM GTA
PG 4

21 COMMITTEE
NAME

22 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:

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 Logan Cheney, and my date of birth is _____.

My Address is 807 Brazos Street, Suite 202, Austin, TX, 78701, USA.
(street) (city) (state) (zip code) (country)

Executed in Travis County, State of Texas, on the 13 day of January, 2022.

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