## APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

## FORM CTA PG 1

| See CTA Instruction Guide for detailed instructions.  |  |                        |                |       |           | 1 Total pages filed: |                                    |                    |  |
|---|--|------------------------|----------------|-------|-----------|----------------------|------------------------------------|--------------------|--|
| 2   | CANDIDATE                                  | ATE MS/MRS/MR FIRST MI |                |       | MI        | OFFICE USE ONLY      |                                    |                    |  |
|   | NAME                                       |                        | DARE           | IA    |           |                      | Filer ID #                         |                    |  |
|   |  | NICKNAME               | LAST           |       |           | SUFFIX               | DateReceived                       | 20                 |  |
|   |  |                        | Jacob          | S     |           | Dr.                  | DateReceived 2025 FEB              |                    |  |
| 3   | CANDIDATE<br>MAILING<br>ADDRESS            | ADDRESS / PO BOX;      | APT / SUITE #, | CITY; | STATE;    | ZIP CODE             | Date Hand-delivered or Poolinarked |                    |  |
| 4   | CANDIDATE<br>PHONE                         | (903)                  | 5221143        |       | EXTENSION |                      | Receipt#                           | Amount \$          |  |
| 5   | OFFICE<br>HELD<br>(if any)                 |                        |                |       |           |                      | Date Imaged                        |                    |  |
| 6   | OFFICE<br>SOUGHT<br>(if known)             |                        |                |       |           |                      |                                    |                    |  |
| 7   | CAMPAIGN<br>TREASURER<br>NAME              | MS/MRS/MR              |                |       | Alexander |                      |                                    |                    |  |
| 8   | CAMPAIGN<br>TREASURER<br>STREET<br>ADDRESS | STREET ADDRESS;        | Good Lati      | NEV   | DALIA     | S                    | STATE;                             | ZIP CODE<br>7.5226 |  |
|   | (residence or business)                    | EXPY                   |                |       |           |                      |                                    |                    |  |
| 9   | CAMPAIGN<br>TREASURER<br>PHONE             | AREA CODE              | PHONE NUMBER   |       | EXTENSIO  | N                    |                                    |                    |  |
|   |  | (469)                  | 734,75         | 80    |           |                      |                                    |                    |  |
| 10 CANDIDATE SIGNATURE  I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.                           |  |                        |                |       |           |                      |                                    |                    |  |
| I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.                        |  |                        |                |       |           |                      |                                    |                    |  |
| I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. |  |                        |                |       |           |                      |                                    |                    |  |
| Signature of Candidate Date Signed  |  |                        |                |       |           |                      |                                    |                    |  |
| GO TO PAGE 2  |  |                        |                |       |           |                      |                                    |                    |  |

www.ethics.state.tx.us

## CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

| 11 CANDIDATE<br>NAME                    |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| 12 MODIFIED<br>REPORTING<br>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 option is valid for one election cycle only. •      (An election cycle includes a primary election, a general election, and any related runoffs.)  |  |  |  |  |  |
|   | Candidates for the office of state chair of a political party     may NOT choose modified reporting. ••   |  |  |  |  |  |
|   | I do not intend to accept more than \$1,110 in political contributions or make more than \$1,110 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report. |  |  |  |  |  |
|   | Year of election(s) or election cycle to Signature of Candidate which declaration applies   |  |  |  |  |  |

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

TEC Filers may send this form to the TEC electronically at <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>
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/QuickFileAReport.php