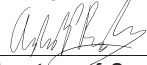


AMENDMENT: APPOINTMENT OF A CAMPAIGN TREASURER BY A GENERAL-PURPOSE COMMITTEE

FORM AGTA
PG 1

See AGTA Instruction Guide for detailed instructions.		1 Total pages filed:
2 COMMITTEE NAME		3 FILER ID #
		OFFICE USE ONLY
4 COMMITTEE NAME	NEW	Date Received
5 ACRONYM	NEW	RECEIVED
6 COMMITTEE ADDRESS	NEW	Date Hand-delivered or Postmarked 2023 MAY-1 AM 8:15
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Receipt# Amounts
7 REPORTING TYPE	NEW	Date Processed
	<input type="checkbox"/> REGULAR <input type="checkbox"/> MONTHLY	CITY SECRETARY DALLAS, TEXAS
		Date Imaged
8 CAMPAIGN TREASURER NAME	NEW	LAST SUFFIX
	MS / MRS / MR FIRST MI NICKNAME	
9 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	NEW	STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE
10 CAMPAIGN TREASURER MAILING ADDRESS	NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	<input type="checkbox"/> same as above	
11 CAMPAIGN TREASURER PHONE	NEW	AREA CODE PHONE NUMBER EXTENSION
	()	
12 PERSON APPOINTING TREASURER		FIRST MI LAST SUFFIX
13 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	
14 ASSISTANT CAMPAIGN TREASURER	NEW	FIRST MI LAST SUFFIX
15 ASSISTANT CAMPAIGN TREASURER ADDRESS	NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
16 ASSISTANT CAMPAIGN TREASURER PHONE	NEW	AREA CODE PHONE NUMBER EXTENSION
	()	
CONTINUE ON PAGE 2 This appointment is effective on the date it is filed with the commission.		

**AMENDMENT: GENERAL-PURPOSE COMMITTEE
CONTROLLING ENTITY INFORMATION**

17 COMMITTEE NAME

18 FILER ID #

**19 CONTROLLING
ENTITY
INFORMATION**

add
 delete

FULL NAME OF CONTROLLING ENTITY

ACRONYM

add
 delete

FULL NAME OF CONTROLLING ENTITY

ACRONYM

add
 delete

FULL NAME OF CONTROLLING ENTITY

ACRONYM

add
 delete

FULL NAME OF CONTROLLING ENTITY

ACRONYM

**20 CONTRIBUTION
DECISION
MAKERS**

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

**21 EXPENDITURE
DECISION
MAKERS**

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

add
 delete

First MI Last Suffix

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**AMENDMENT: GENERAL-PURPOSE COMMITTEE
RECIPIENT COMMITTEES**

**FORM AGTA
PG 3**

22 COMMITTEE NAME

23 FILER ID #

24 RECIPIENT
GENERAL
PURPOSE
COMMITTEES

<input type="checkbox"/> ADD	Committee name
.....	
Committee address;	City; State; Zip Code

<input type="checkbox"/> ADD	Committee name
.....	
Committee address;	City; State; Zip Code

<input type="checkbox"/> ADD	Committee name
.....	
Committee address;	City; State; Zip Code

<input type="checkbox"/> ADD	Committee name
.....	
Committee address;	City; State; Zip Code

<input type="checkbox"/> ADD	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>

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