

**AMENDMENT: APPOINTMENT OF A  
CAMPAIGN TREASURER BY A CANDIDATE**

**FORM ACTA  
PG 1**

<b>1 CANDIDATE NAME</b> <span style="font-size: 1.2em; font-family: cursive;">Ruth Torres</span>	<b>2 FILER ID #</b> 	<b>3 Total pages filed:</b> 
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**See ACTA Instruction Guide for detailed instructions.  
Use this form for changes to existing information only. Do not provide information previously disclosed.**

<b>4 CANDIDATE NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; border: 1px solid black;"><input type="checkbox"/> NEW</td> <td style="width:15%; border: 1px solid black;">MS / MRS / MR</td> <td style="width:20%; border: 1px solid black;">FIRST <span style="font-size: 1.2em; font-family: cursive;">Ruth</span></td> <td style="width:10%; border: 1px solid black;">MI</td> <td style="width:45%;"></td> </tr> <tr> <td style="border: 1px solid black;"></td> <td style="border: 1px solid black;"></td> <td style="border: 1px solid black;">LAST <span style="font-size: 1.2em; font-family: cursive;">Torres</span></td> <td style="border: 1px solid black;">SUFFIX</td> <td style="border: 1px solid black;"></td> </tr> </table>	<input type="checkbox"/> NEW	MS / MRS / MR	FIRST <span style="font-size: 1.2em; font-family: cursive;">Ruth</span>	MI				LAST <span style="font-size: 1.2em; font-family: cursive;">Torres</span>	SUFFIX		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; padding: 2px;">OFFICE USE ONLY</th> </tr> <tr> <td style="width:50%; padding: 2px;">Date Received</td> <td style="width:50%; padding: 2px;"> <div style="text-align: center; font-size: 0.8em;">                 CITY SECRETARY                  DALLAS, TEXAS                  2021 JAN 13 PM 3:40                  RECEIVED             </div> </td> </tr> <tr> <td style="padding: 2px;">Date Hand-delivered or Postmarked</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Receipt #</td> <td style="padding: 2px;">Amount \$</td> </tr> <tr> <td style="padding: 2px;">Date Processed</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Date Imaged</td> <td style="padding: 2px;"></td> </tr> </table>	OFFICE USE ONLY		Date Received	<div style="text-align: center; font-size: 0.8em;">                 CITY SECRETARY                  DALLAS, TEXAS                  2021 JAN 13 PM 3:40                  RECEIVED             </div>	Date Hand-delivered or Postmarked		Receipt #	Amount \$	Date Processed		Date Imaged	
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<b>7 OFFICE HELD</b> <small>(if any)</small>	<input type="checkbox"/> NEW
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<b>8 OFFICE SOUGHT</b> <small>(if known)</small>	<input type="checkbox"/> NEW	<span style="font-size: 1.2em; font-family: cursive;">Dallas City Council, District 5</span>
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<b>9 CAMPAIGN TREASURER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; border: 1px solid black;"><input type="checkbox"/> NEW</td> <td style="width:15%; border: 1px solid black;">MS / MRS / MR</td> <td style="width:20%; border: 1px solid black;">FIRST <span style="font-size: 1.2em; font-family: cursive;">Ruth</span></td> <td style="width:10%; border: 1px solid black;">MI</td> <td style="width:15%; border: 1px solid black;">NICKNAME</td> <td style="width:15%; border: 1px solid black;">LAST <span style="font-size: 1.2em; font-family: cursive;">Torres</span></td> <td style="width:15%; border: 1px solid black;">SUFFIX</td> </tr> </table>	<input type="checkbox"/> NEW	MS / MRS / MR	FIRST <span style="font-size: 1.2em; font-family: cursive;">Ruth</span>	MI	NICKNAME	LAST <span style="font-size: 1.2em; font-family: cursive;">Torres</span>	SUFFIX
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<b>10 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(residence or business)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; border: 1px solid black;"><input type="checkbox"/> NEW</td> <td style="width:45%; border: 1px solid black;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; border: 1px solid black;">APT / SUITE #;</td> <td style="width:15%; border: 1px solid black;">CITY;</td> <td style="width:15%; border: 1px solid black;">STATE;</td> <td style="width:10%; border: 1px solid black;">ZIP CODE</td> </tr> <tr> <td style="border: 1px solid black;"></td> <td style="border: 1px solid black;"><span style="font-size: 1.2em; font-family: cursive;">7132 Sorenson Circle</span></td> <td style="border: 1px solid black;"><span style="font-size: 1.2em; font-family: cursive;">Dallas, TX</span></td> <td style="border: 1px solid black;"><span style="font-size: 1.2em; font-family: cursive;">75227</span></td> <td style="border: 1px solid black;"></td> <td style="border: 1px solid black;"></td> </tr> </table>	<input type="checkbox"/> NEW	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE		<span style="font-size: 1.2em; font-family: cursive;">7132 Sorenson Circle</span>	<span style="font-size: 1.2em; font-family: cursive;">Dallas, TX</span>	<span style="font-size: 1.2em; font-family: cursive;">75227</span>		
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<b>12 CANDIDATE SIGNATURE</b>	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <hr style="width: 80%; margin: 0 auto;"/> <p>Signature of Candidate</p> </div> <div style="width: 45%; text-align: center;"> <span style="font-size: 1.2em; font-family: cursive;">1/13/2021</span> <hr style="width: 80%; margin: 0 auto;"/> <p>Date Signed</p> </div> </div>
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**GO TO PAGE 2**