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 | MS / MRS / MR FIRST MI | OFFICE USE ONLY | | | |
| | NAME | Mrs Jamila | Filer ID # | | | |
| | | NICKNAME LAST SUFFIX | Date Received | | | |
| | | Vamie Branch | Waller Co. Elections | | | |
| 3 | CANDIDATE MAILING | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | Solvent 1 2 2023 | | | |
| | ADDRESS | P.O. 1500 4023 | RECEIVED | | | |
| | | Prairie Vew TX 77446 | Date Hand-delivered or Postmarked | | | |
| 4 | CANDIDATE PHONE | AREA CODE PHONE NUMBER EXTENSION | Waller Co. Elections | | | |
| | PHONE | (346) 971-7393 | SEP 1 2 2023 | | | |
| _ | | (3(6) 11(-12) | RECEIVED | | | |
| 5 | OFFICE HELD (if any) | | Date Imaged | | | |
| 6 | OFFICE SOUGHT (if known) | Waller County Commissioner | r Preemet3 | | | |
| 7 | CAMPAIGN TREASURER | MS/MRS/MR FIRST MI NICKNAME | LAST SUFFIX | | | |
| | NAME | Samila Branch | | | | |
| 8 | CAMPAIGN | STREET ADDRESS; APT / SUITE #; CITY; | STATE; ZIP CODE | | | |
| | TREASURER STREET ADDRESS | in a Colin of | | | | |
| (| (residence or business) | 120 Slm 8t PV, DO 77446 | | | | |
| 9 | CAMPAIGN | AREA CODE PHONE NUMBER EXTENSION | | | | |
| | TREASURER PHONE | (346) 971-7393 | | | | |
| 10 | CANDIDATE SIGNATURE | I am aware of the Nepotism Law, Chapter 573 of the Te | xas Government Code. | | | |
| | | I am aware of my responsibility to file timely reports as the Election Code. | required by title 15 of | | | |
| | | I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. | | | | |
| | | Signaturation | 9/12/23 | | | |
| - | | Signature of Candidate | Date Signed | | | |
| GO TO PAGE 2 | | | | | | |

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

| 11 | CANDIDATE NAME | | | |
|---|-------------------|---|---|--|
| 12 MODIFIED REPORTING DECLARATION CHOOSING MODIFIED REPORTING | | 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 \$1,010 in political contributions or make more than \$1,010 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 | | |
| | | | | |
| | | | _ | |
| | 7 | 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 treasappoint@ethics.state.tx.us | | |
| | | 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 | | |
| 1 | | For more information about where to file go to: | | |

https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php