

**AMENDMENT: APPOINTMENT OF A CAMPAIGN
TREASURER BY A COUNTY EXECUTIVE COMMITTEE**

**FORM ACECTA
PG 1**

See ACECTA Instruction Guide for detailed instructions.		1 FILER ID #	2 Total pages filed:				
3 COMMITTEE NAME	<input type="checkbox"/> OLD	OFFICE USE ONLY					
	<input type="checkbox"/> NEW						
4 ACRONYM	<input type="checkbox"/> NEW	Date Received					
		Date Hand-delivered or Postmarked					
5 PRINCIPAL COMMITTEE	<input type="checkbox"/> NEW	<input type="checkbox"/> NO	<input type="checkbox"/> YES				
		Receipt #		Amount \$			
6 COMMITTEE ADDRESS	<input type="checkbox"/> NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		Date Processed			
		Date Imaged					
7 REPORTING TYPE	<input type="checkbox"/> NEW	<input type="checkbox"/> REGULAR <input type="checkbox"/> MONTHLY					
8 CAMPAIGN TREASURER NAME	<input type="checkbox"/> NEW	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
9 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	<input type="checkbox"/> NEW	STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE					
10 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> same as above	<input type="checkbox"/> NEW	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE					
11 CAMPAIGN TREASURER PHONE	<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION			
		()					
12 PERSON APPOINTING TREASURER		FIRST	MI	LAST			
13 SIGNATURE		I understand that I have been appointed as the campaign treasurer for this county executive 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					

CONTINUE ON PAGE 2

This appointment is effective on the date it is filed with the commission.

**AMENDMENT: COUNTY EXECUTIVE COMMITTEE
ASSISTANT TREASURER & RECIPIENT COMMITTEES**

**FORM ACECTA
PG 2**

14 COMMITTEE NAME	15 FILER ID #
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16 ASSISTANT CAMPAIGN TREASURER	NEW	FIRST	MI	LAST	SUFFIX
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17 ASSISTANT CAMPAIGN TREASURER ADDRESS	NEW	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
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18 ASSISTANT CAMPAIGN TREASURER PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION
		()		

19 RECIPIENT GENERAL PURPOSE COMMITTEES	ADD	Committee name
.....		
Committee address; City; State; Zip Code		

ADD	Committee name
.....	
Committee address; City; State; Zip Code	

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED