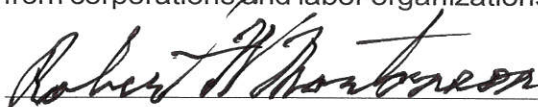


APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.						1 Total pages filed: 4
2 CANDIDATE NAME	MS / MRS / MR MR	FIRST Robert	MI W	OFFICE USE ONLY <hr/> Acct. # <hr/> Date Received <div style="text-align: center; color: blue; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">FEB 09 2017</div> <div style="text-align: center; color: blue; font-weight: bold; font-size: 0.8em;">City Secretary's Office</div> <hr/> Date Hand-delivered or Postmarked <div style="text-align: center; color: blue;">10:06 AM. 2-9-2017</div> <hr/> Date Processed <div style="text-align: center; color: blue;">2-9-2017</div> <hr/> Date Imaged <div style="text-align: center; color: blue;">2-9-2017</div>		
	NICKNAME Bob	LAST Mortonson	SUFFIX			
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	234 Love Bird LN		Murphy, TX 75094			
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(253)	653-5347				
5 OFFICE HELD (if any)	NONE					
6 OFFICE SOUGHT (if known)	MAYOR					
7 CAMPAIGN TREASURER NAME	MS/MRS/MR MR	FIRST Robert	MI W	NICKNAME Bob	LAST Mortonson	SUFFIX
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
	234 Love Bird LN, Murphy, TX 75094					
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(253)	653-5347				
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Signature of Candidate </div> <div style="text-align: center;"> February 9, 2017 <hr/> Date Signed </div> </div>					

GO TO PAGE 2

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA
PG 2

11 CANDIDATE NAME

Robert W Bob Mortonson

12 MODIFIED REPORTING 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 \$500 in political contributions or make more than \$500 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.

2017 May Election
Year of election(s) or election cycle to which declaration applies

Robert W Mortonson
Signature of Candidate

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