## APPO NTMENT OF A CAMPA GN TREASURER FORM CTA BY A CANDIDATE

## PG 1

See CTA Instruction Guide for detailed instructions.						1 Total pages	1 Total pages filed	
2	CANDIDATE NAME	ms/mrs/mr Ms	FIRST Roxanr	ne	МІ	<b>OFFI</b> Filer ID #	CE USE ONLY	
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3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY	STATE; ZIP COD	E 11/13	12020	
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	PHONE	(817) 29	96-6586					
5	OFFICE HELD (if any)					Date Imaged		
6	OFFICE SOUGHT (if known)	FWISD School Board Trustee						
7	CAMPAIGN	MS/MRS/MR	FIRST	МІ	NICKNAME	LAST	SUFFIX	

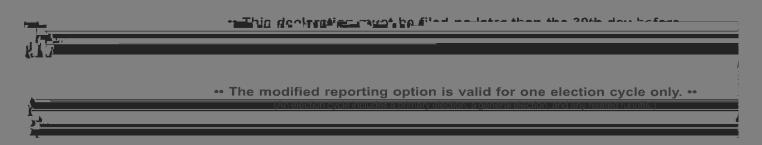
## CAND ATE MOD F ED REPORT NG DECLARAT ON

11 CANDIDATE NAME

Ms. Roxanne Martinez

12 MODIFIED REPORTING DECLARATION

## COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING



the first election to which the declaration applies. ..

•• Candidates for the office of state chair of a political party may NOT choose modified reporting. ••

I do not intend to accept more than \$900 in political contributions or make more than \$900 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

repart of election(s) or election cycle to which declaration applies

Signature of Candidate

This appointment Esc efficutive wat the thatefut its villed the that full build be appropriate if ing authority.

DO NOT SEND TO TEC

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