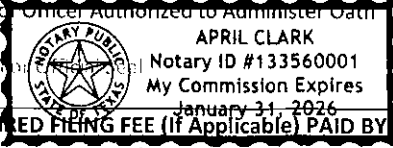


**APPLICATION FOR A PLACE ON THE BALLOT FOR A SPECIAL ELECTION
 FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION**

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>KCISD School Board</u> SPECIAL ELECTION BALLOT		
TO: City Secretary/Secretary of Board (name of election)		
I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.		
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) <u>School Board District 3</u>	INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED	
FULL NAME (First, Middle, Last) <u>F. ROBERT JANYSEK JR.</u>	PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>ROBERT JANYSEK</u>	
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>23251 N. FM. 81</u>	PUBLIC MAILING ADDRESS (Address for which you receive campaign related correspondence, if available.) <u>23251 N FM 81</u>	
CITY <u>HOBSON</u>	STATE <u>TX</u>	ZIP <u>78117</u>
CITY <u>HOBSON</u>	STATE <u>TX</u>	ZIP <u>78117</u>
PUBLIC EMAIL ADDRESS (Address for which you receive campaign related emails, if available.) <u>F.robertyjanysek@yahoo.com</u>	OCCUPATION (Do not leave blank) <u>SELF-EMPLOYED</u>	DATE OF BIRTH <u>10/08/1964</u>
VOTER REGISTRATION VOID NUMBER ² (Optional) <u>1014872984</u>		
TELEPHONE CONTACT INFORMATION (Optional) Home: <u>830-583-5450</u> Office: <u>830-583-5450</u> Cell: <u>830-583-5450</u>		
FELONY CONVICTION STATUS (You MUST check one)	LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN	
<input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³	IN THE STATE OF TEXAS <u>57</u> year(s) <u>10</u> month(s)	IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED <u>57</u> year(s) <u>10</u> month(s)
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.		
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>F. Robert Janysek Jr.</u> who being by me here and now duly sworn, upon oath says:		
"I, (name of candidate) <u>F. Robert Janysek Jr.</u> of <u>Karnes</u> County, Texas, being a candidate for the office of <u>District 3</u> , swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."		
<u>X</u> <u>F. Robert Janysek Jr.</u> SIGNATURE OF CANDIDATE		
Sworn to and subscribed before me this the <u>2</u> day of <u>August</u> , <u>2022</u> , by <u>F. Robert Janysek Jr.</u>		
<u>April Clark</u> Signature of Officer Authorized to Administer Oath ⁴		
<u>April Clark</u> Printed Name of Officer Authorized to Administer Oath		
<u>Superintendent Secretary/Notary</u> Title of Officer Authorized to Administer Oath		
Notary Public  APRIL CLARK Notary ID #133560001 My Commission Expires January 31, 2026		
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY		
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE.		
This document and <u>2</u> filing fee or a nominating petition of _____ pages received. <input checked="" type="checkbox"/> Voter Registration Status Verified		
<u>8/2/22</u> Date Received	<u>8/2/22</u> Date Accepted	(See Section 1.007) <u>April Clark</u> Signature of Filing Officer or Designee

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

1 Total pages filed:

OFFICE USE ONLY

Filer ID #

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount \$

Date Processed

8/2/22

Date Imaged

2 CANDIDATE
NAME

MS / MRS / MR

FIRST

MI

Mr. FABIAN R

NICKNAME

LAST

SUFFIX

ROBERT JANSEK Jr.

3 CANDIDATE
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

23251 N FM 81 HOBSON TX 78117

4 CANDIDATE
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(830) 583-5450

5 OFFICE
HELD
(if any)

6 OFFICE
SOUGHT
(if known)

KARLES CITY ISD. SCHOOL BOARD TRUSTEE

7 CAMPAIGN
TREASURER
NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. FABIAN R. ROBERT JANSEK Jr.

8 CAMPAIGN
TREASURER
STREET
ADDRESS

(residence or business)

STREET ADDRESS;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

23251 N FM 81 HOBSON TX 78117

9 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

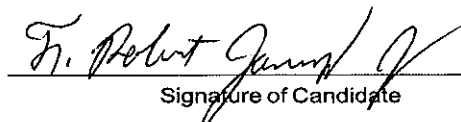
(830) 583-5450

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.


Signature of Candidate

8-1-2022
Date Signed

GO TO PAGE 2

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

**11 CANDIDATE
NAME**

**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 \$940 in political contributions
or make more than \$940 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
which declaration applies

Signature of Candidate

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

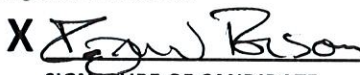
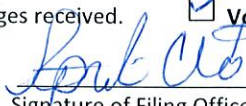
TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us
or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

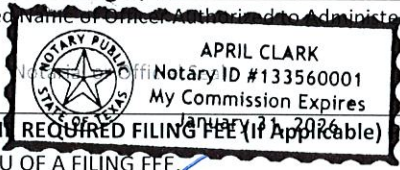
**Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC**

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

**APPLICATION FOR A PLACE ON THE BALLOT FOR A SPECIAL ELECTION
 FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION**

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

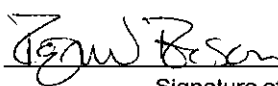
APPLICATION FOR A PLACE ON THE <u>Karnes City ISD Board of Trustees, Place 3</u> SPECIAL ELECTION BALLOT TO: City Secretary/Secretary of Board (name of election) I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.					
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) <u>Karnes City ISD Board of Trustees, Place 3</u>			INDICATE TERM <input checked="" type="checkbox"/> FULL <input checked="" type="checkbox"/> RR UNEXPIRED		
FULL NAME (First, Middle, Last) <u>Raymond Robinson</u>			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>Raymond Robinson</u>		
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>304 W. Live Oak Dr. Karnes City, TX 78118 RR</u>			PUBLIC MAILING ADDRESS (Address for which you receive campaign related correspondence, if available.) <u>304 W. Live Oak Dr. Karnes City RA</u>		
CITY <u>Karnes City</u>		STATE <u>TX</u>	ZIP <u>78118</u>	CITY <u>Karnes City</u>	
STATE <u>TX</u>		ZIP <u>78118</u>		STATE <u>TX</u>	
ZIP <u>78118</u>		CITY <u>Karnes City</u>		STATE <u>TX</u>	
ZIP <u>78118</u>		STATE <u>TX</u>		ZIP <u>78118</u>	
PUBLIC EMAIL ADDRESS (Address for which you receive campaign related emails, if available.)		OCCUPATION (Do not leave blank) <u>Educator</u>		DATE OF BIRTH <u>10/05/1971</u>	
VOTER REGISTRATION VUID NUMBER² (Optional) <u>1014923567</u>					
TELEPHONE CONTACT INFORMATION (Optional) Home: _____ Office: _____ Cell: <u>210-316-7387</u>					
FELONY CONVICTION STATUS (You MUST check one) <input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³			LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN IN THE STATE OF TEXAS <u>50</u> year(s) <u>8</u> month(s)		
			IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED _____ year(s) _____ month(s)		
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>Raymond Robinson</u> , who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>Raymond Robinson</u> , of <u>Karnes</u> County, Texas, being a candidate for the office of <u>KCISD Board of Trustees, Place 3</u> , swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct." <div style="text-align: right;">  _____ SIGNATURE OF CANDIDATE </div>					
Sworn to and subscribed before me this the <u>23</u> day of <u>August</u> , <u>2022</u> , by <u>Raymond Robinson</u> . (day) (month) (year) (name of candidate)					
_____ Signature of Officer Authorized to Administer Oath ⁴ <u>Admin Asst -</u> Title of Officer Authorized to Administer Oath			_____ Printed Name of Officer Authorized to Administer Oath <u>April Clark</u>		
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (if Applicable) PAID BY: <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE.					
This document and \$ <u>0</u> filing fee or a nominating petition of _____ pages received. <input checked="" type="checkbox"/> Voter Registration Status Verified					
<u>8/23/22</u> Date Received		<u>8/25/22</u> Date Accepted		(See Section 1.007)  Signature of Filing Officer or Designee	



1952-1953
1954-1955
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2006-2007
2008-2009
2010-2011
2012-2013
2014-2015
2016-2017
2018-2019
2020-2021

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 NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Mr. Raymond						Filer ID #
	NICKNAME	LAST	SUFFIX	Date Received			
	Robinson						Date Hand-delivered or Postmarked
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Receipt #	
	304 W. Live Oak Dr. Karnes City, TX						Amount \$
	78118						Date Processed
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Imaged			
	(210) 316-7387						
5 OFFICE HELD (if any)							
6 OFFICE SOUGHT (if known)	Karnes City ISD Board of Trustees, Place 3						
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX	
	Mr. Raymond Robinson						
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	304 W. Live Oak Dr., Karnes City, TX 78118						
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(210) 316-7387						
10 CANDIDATE SIGNATURE	<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>						
	 Signature of Candidate				8-18-2022 Date Signed		

GO TO PAGE 2

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

11 CANDIDATE
NAME

Raymond Robinson

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 \$940 in political contributions
or make more than \$940 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
which declaration applies

Signature of Candidate

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**

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

**APPLICATION FOR A PLACE ON THE BALLOT FOR A SPECIAL ELECTION
 FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION**

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>Karnes City SB District 3</u> SPECIAL ELECTION BALLOT					
TO: City Secretary/Secretary of Board (name of election)					
I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.					
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) <u>School Board District 3</u>			INDICATE TERM <input type="checkbox"/> FULL <input checked="" type="checkbox"/> UNEXPIRED		
FULL NAME (First, Middle, Last) <u>Sherry Faye Sommer</u>			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>Sherry Sommer</u>		
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>806 Siesta Drive Karnes City, TX 78118</u>			PUBLIC MAILING ADDRESS (Address for which you receive campaign related correspondence, if available.) <u>806 Siesta Drive</u>		
CITY <u>Karnes City</u>	STATE <u>TX</u>	ZIP <u>78118</u>	CITY <u>Karnes City</u>	STATE <u>TX</u>	ZIP <u>78118</u>
PUBLIC EMAIL ADDRESS (Address for which you receive campaign related emails, if available.) <u>sfsummer74@att.net</u>		OCCUPATION (Do not leave blank) <u>Retired / Part Time Special Ed Student CMT AAD Facilitator</u>	DATE OF BIRTH <u>8/27/2022</u>	VOTER REGISTRATION VUID NUMBER ² (Optional) <u>1014872670</u>	
TELEPHONE CONTACT INFORMATION (Optional) Home: Office: Cell: <u>(830) 534-2375</u>					
FELONY CONVICTION STATUS (You MUST check one)			LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN		
<input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³			IN THE STATE OF TEXAS <u>66</u> year(s) <u>0</u> month(s)		IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED ____ year(s) ____ month(s)
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) <u>Sherry Sommer</u> , who being by me here and now duly sworn, upon oath says:					
"I, (name of candidate) <u>Sherry Sommer</u> , of <u>Karnes</u> County, Texas, being a candidate for the office of <u>Board of Trustee District 3</u> , swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."					
X <u>Sherry Sommer</u> SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this the <u>25th</u> day of <u>August</u> , <u>2022</u> , by <u>Sherry Sommer</u> (day) (month) (year) (name of candidate)					
Signature of Officer Authorized to Administer Oath ⁴ <u>Marisa Beaver</u> Notary Public			Signature of Officer Authorized to Administer Oath <u>Marisa Beaver</u> Notary Public, State of Texas Comm. Expires 11-18-2025 Notary ID 129629115		
TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY: <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE. This document and \$ <u>0</u> filing fee or a nominating petition of _____ pages received. <input checked="" type="checkbox"/> Voter Registration Status Verified <u>8/25/22</u> <u>8/25/22</u> (See Section 1.007) <u>Paul [Signature]</u> Date Received Date Accepted Signature of Filing Officer or Designee					

1. The first part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

2. The second part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

3. The third part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

4. The fourth part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

5. The fifth part of the document is a list of names and titles, including "The Hon. Mr. Justice" and "The Hon. Mr. Justice".

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 NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Sherry			Filer ID #	Date Received		
	NICKNAME	LAST	SUFFIX	Sommer			
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	806 Siesta Drive						Date Hand-delivered or Postmarked
	Karnes City, TX. 78118						
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(830)	534-2375					
5 OFFICE HELD (if any)	N/A						Receipt #
							Amount \$
6 OFFICE SOUGHT (if known)	Board of Trustee, District 3						
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX	
	N/A						
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	N/A						
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	()	N/A					
10 CANDIDATE SIGNATURE	<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> <p><u>Sherry Sommer</u> Signature of Candidate</p> <p><u>8-22-2022</u> Date Signed</p>						

GO TO PAGE 2

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

11 CANDIDATE
NAME

12 MODIFIED
REPORTING
DECLARATION

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

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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 \$940 in political contributions
or make more than \$940 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
which declaration applies

Signature of Candidate

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**

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>