FORM CTA PG 1

5	1 Total pages filed:		
2 CANDIDATE NAME	MS/MRS/MR) FIRST MI Athew NICKNAME LAST SUFFIX	OFFICE USE ONLY Filer ID # Y: Date Received Date Received Date Received Date Received Date Received Date Received FILE D FILE	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE SOUTH Lake TY 1609}	Date Hard-delivered & Postmark	
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 405 8739	Receipt# Amount\$ Date Processed	
5 OFFICE HELD (if any)		Date Imaged	
6 OFFICE SOUGHT (if known)	TAD Board of Directors	Place 3	
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME	LAST SUFFIX	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business	STREET ADDRESS; APT / SUITE #; CITY: SOUTH Lake	STATE: ZIP CODE	
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 244 3087		
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Tell am aware of my responsibility to file timely reports as the Election Code. I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations. Signature of Candidate	s required by title 15 of	

	E NT : APPOINTMENT OF A REASURER BY A CANDIDATE		FORM ACTA PG 1
1 CANDIDATE NAME Math	w C. Bryant	2 FILER ID#	3 Total pages filed:
Use this form	See ACTA Instruction Guid for changes to existing information <i>or</i>	de for detailed instructions. nly. Do not provide information pro	eviously disclosed.
4 CANDIDATE NAME	NEW MS/MRS/MR FIRST Mathon NICKNAME LAST Bryan	SUFFIX	OFFICE USE ONLY Received Y: TARRA/
5 CANDIDATE MAILING ADDRESS		76092 Date	Hand-delivered or Postmarked plus ipt # Ameent \$ 200 Processed
6 CANDIDATE PHONE	NEW AREA CODE PHONE NUMBER (214) 405 87		Imaged
7 OFFICE HELD (if any)	NEW		
8 OFFICE SOUGHT (if known)	TAD Board of	- Directors Pla	4 3
9 CAMPAIGN TREASURER NAME	NEW MS/MRS/MR FIRST	MI NICKNAME LAS	T SUFFIX
10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	NEW STREET ADDRESS (NO PO BOX PLEASE):	Southlake, TX 7	STATE: ZIP CODE
11 CAMPAIGN TREASURER PHONE	NEW AREA CODE PHONE NUMBER (ALY) 244 - 3	EXTENSION OF7	
12 CANDIDATE SIGNATURE	I am aware of the Nepotism La I am aware of my responsibilithe Election Code. I am aware of the restrictions if from corporations and labor of Signature of Candidate	n title 15 of the Election Code ganizations.	uired by title 15 of
	GO TO	PAGE 2	

AMENDMENT:

CANDIDATE MODIFIED REPORTING DECLARATION

FORM ACTA PG 2

13 CANDIDATE NAME NEW 14 MODIFIED REPORTING COMPLETE THIS SECTION ONLY IF YOU ARE **DECLARATION CHOOSING MODIFIED REPORTING** * CTA submitted without signature . 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 \$1,080 in political contributions or make more than \$1,080 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.

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

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

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

	APPOINTME BY A CANE	FORM CTA	
	See	1 Total peges filed: EB II	
2	CANDIDATE NAME	MS/MRS/MR FIRST MI Mr. Eric B NICKNAME LAST SUFFIX Crile	OFFICE USE ONLY OF THE PROPERTY OF THE PROPERT
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #, CITY; STATE; ZIP CODE Fort Worth TX 76052	Date Hand-delivered or Postmarked
4	CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (954) 600-0538	Receipt # Amount \$
5	OFFICE HELD (If any)	None	Date Imaged
6	OFFICE SOUGHT (if known)	Tarrant Appraisal District-At Large Place 2	
7	CAMPAIGN TREASURER NAME	Mr. Eric B. Crile	LAST SUFFIX
8	CAMPAIGN TREASURER STREET ADDRESS residence or business)	Fort Worth TX 76052	STATE; ZIP CODE
9	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (954) 600-0538	
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te I am aware of my responsibility to file timely reports as the Election Code. I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations. Signature of Candidate	required by title 15 of
		GO TO PAGE 2	

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME	Mr. Eric B. Crile		
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 \$1,080 in political contributions or make more than \$1,080 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 appoi	ntment 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			

M. 43

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Revised 1/1/2024

FORM CTA PG 1

See CTA Instruction Guide for detailed instructions.					1 Total pages file	ed:
2 CANDIDATE	MS/MRS/MR	FIR\$T		Mi	OFFICE	USE ONLY
NAME	Lee O				Filer ID # - CO	
	NICKNAME	LAST	12 81 12 8 8	SUFFIX	Date Received	7 5
	Henderson				Dalle Necessary	
3 CANDIDATE	ADDRESS / PO BOX: AP	T / SUITE #,	CITY: STATE	ZIP CODE		28 BHE
MAILING ADDRESS	Fort Worth TV 7610	7				
	Fort Worth, TX 7610	17			Date Hand-delivered	
					Description (Control of Control o	<u> </u>
4 CANDIDATE PHONE	AREA CODE PH	ONE NUMBER	EXTENSI	ON	Receipt#	Amount \$
	(817)896-4900				Date Processed	
5 OFFICE HELD (if any)	n/a				Date Imaged	
6 OFFICE SOUGHT (If known)	Tarrant Appraisal Dis	strict Board of Dir	ectors Place 3		-	
7 CAMPAIGN	MS/MRS/MR FIR	ST	MI NICKNAM	iE.	LAST	SUFFIX
TREASURER NAME	Carin "CJ" Evans					
8 CAMPAIGN TREASURER	STREET ADDRESS;	APT/\$	HTE#	CITY,	STATE	ZIP CODE
STREET ADDRESS	Fort Worth, TX 7611	0				
(residence or business)						
	1051 0055					
9 CAMPAIGN TREASURER	AREA CODE PH	ONE NUMBER	EXTENSE	DN		
PHONE	(817) 929-6365	5				
10 CANDIDATE SIGNATURE	l am aware of th	ne Nepotism L	aw, Chapter 57	3 of the Te	xas Governn	nent Code.
74	I am aware of n the Election Cod		ty to file timely	reports as	required by	title 15 of
	I am aware of the			Election C	ode on contr	ibutions
	1	11 _		Ω	-26 - 20	24
	Sight	ature of Candidate	•		Date Signe	
	1	GO TO	PAGE 2	W477-2		

FORM CTA

See	1 Total pages file	i			
2 CANDIDATE	MS / MRS (MR) FIRST	M	1	OFFICE	USE ONLY
NAME	Charles	_	5	Fiter ID#	52/A
	NICKNAME LAST		JFFIX		m m
	NICKNAME LAST	30	DEFIN.	Date Received	123 EC.
	Chuck Beller	7			開場
3 CANDIDATE MAILING	ADDRESS / PO BOX: APT / SUITE #:	CILY: STATE: ZII	PCODE	4	(I 55⊈∃
ADDRESS			1		9 250
	Colley ville Tx	76036	-	Date Hand-delivered o	(Postmirked (/)
		16034			22 HE
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER	EXTENSION		Receipt #	Anduirs =
FHONE	(8)7) 02 = 20=	^	-	Date Processed	45
	(817) 235 788 Colleyville City	<u> </u>			
5 OFFICE HELD	(Colley ville City	LOUNCIL		Date Imaged	
(if any)	Dlace 5		L		
6 OFFICE	Targant Appriorsal	Board			
(if known)	Place 3				
7 CAMPAIGN	MS/MRS/MR FIRST	MI NICKNAME		LAST	SUFFIX
TREASURER NAME	Lew mollenkamy	2			
8 CAMPAIGN	STREET ADDRESS. APT / SU	JITE #, CITY;		STATE:	ZIP CODE
TREASURER STREET					
ADDRESS		2404			
(residence or business)	Fort worth, IX	16244			
a CAMPAICH	AREA CODE PHONE NUMBER	EXTENSION			
9 CAMPAIGN TREASURER	THE TOTAL NAME				
PHONE	(469) 585 1898	<u> </u>			
	101000 1010	<u> </u>			
10 CANDIDATE SIGNATURE	I am aware of the Nepotism La	ow Chapter 573 c	of the Tev	as Governn	nent Code
	Tain aware of the Nepotisin La	avv, Chapter 373 C	JI (IIC ICA	as Governi	ient oode.
	I am aware of my responsibili	ty to file timely re	ports as	required by	title 15 of
	the Election Code.			. ,	
	I am aware of the restrictions j	in title 15 of the Eld	ection Co	nde on contr	ibutions
	from corporations and labor or	ganizations.	, , O		1 mm mm mm f 7 mm
	1/////	% 5	_ /	. /	
			2/	6124	
	Signature of Candidate	3		Date Signe	d
	GO ТО	PAGE 2			

BY A CANI	ENT OF A CAMPAIGN TREASURER DIDATE	FORM CTA					
See	CTA Instruction Guide for detailed Instructions.	1 Total pages filed:					
2 CANDIDATE	MS/MRS/MR FIRST MI	OFFICE USE ONLY					
NAME	Mr. Eric S.	Filer ID# 7 29 Em					
	NICKNAME LAST SUFFIX Morris	Date Received					
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE Haltom City TX 76117	Date Hand-delivered or Postmarked BA					
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt # (//) Amount \$					
FIONE	(817) 709-9169	Date Processed					
5 OFFICE HELD (if any)	Haltom City, City Council Place 4	Date Imaged					
6 OFFICE SOUGHT (if known)	Tarrant Appraisal District Board	d of Directors Place					
7 CAMPAIGN TREASURER NAME	Mr. Eric S. Mo	east suffix					
8 CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS: APT / SUITE #: CITY: Haltom City 7	STATE; ZIP CODE					
(residence or business)	114.00.01 0109	7 10111					
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 709 - 9169						
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	exas Government Code.					
	I am aware of my responsibility to file timely reports as the Election Code.	s required by title 15 of					
	I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	Code on contributions					
		01/03/2024					
	Signature of Candidate	Date Signed					
	GO TO PAGE 2						

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME	Eric Morris
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.)
I do not intend to accept more than \$1,010 in political contribution make more than \$1,010 in political expenditures (excluding filing fin connection with any future election within the election cycle. 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

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

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or mail to

Texas Ethics Commission

P.O. 8ox 12070

Austin, TX 78711-2070

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FORM CTA PG 1

See	CTA Instruction Guide for detailed instructions	s.	1 Total pages filed:
2 CANDIDATE	MS/MRS/MR FIRST	Mi	OFFICE USE ONLY
NAME	Mrs. Callie	Jo	Filer ID#
	NICKNAME LAST	SUFFIX	Date Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; GITY;	STATE, ZIP CODE	EB -6 AP
	Colleyville	e .TX 76034	Date Hand-delivered or Postmarked
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER	EXTENSION	Receipt# Amounts
	(682) 651-5495		Date Processed
5 OFFICE HELD (if any)	ColleyvilleMayorF	ProTem	Date imaged
6 OFFICE SOUGHT (if known)	TAD Board of Dire		1ce 2
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI	NICKNAME	LAST SUFFIX
	Mrs. Callie Jo F	Rigney	
8 CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS; APT / SUITE #:	CITY	STATE; ZIP CODE
(residence or business)	Colle	uville T	X 76034
9 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	(682) 651 -5495		
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Cha	pter 573 of the Te	xas Government Code.
	I am aware of my responsibility to file the Election Code.	timely reports as	required by title 15 of
	am aware of the restrictions in title 15 from corporations and labor organizations		Code on contributions
	Signature of Candidate		2/6/2024 Date Signed
	GO TO PAGE 2	2	(1 %) (2)

FORM CTA

		- 10 W - 10 W	7704.04.04.04	-11000000000000000000000000000000000000				
	See CTA Instruction Guide for detailed instructions.					1 Total pages filed:		
2	CANDIDATE NAME	Mrs. Sayeda Bilqees	LAST		MI	OFFICE Filer ID # Date Received	USE ONLY	[7]
		ADDOCCO (BD BOY 40)	Syed					TAR
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX, AP	Colleyvill	e TX, 76034	ZIP CODE	Date Hand-delivered	or Postmanded	RANT COUNT
4	CANDIDATE PHONE	AREA CODE PH	ONE NUMBER	EXTENSIO	ON	Receipt# Date Processed	Amount 3	ATION A
5	OFFICE HELD (if any)	None				Date Imaged		U2 500
6	OFFICE SOUGHT (If known)	Tarrant County Appr	aisal Board of Dir	ectors At-Large Pla	ce I			
7	CAMPAIGN TREASURER NAME	Ms/MRS/MR FIR	ST	MI NICKNAM	٤	LAST	SUFFIX	
8	CAMPAIGN TREASURER STREET ADDRESS residence or business)	STREET ADDRESS;	Colleyvill	uite#. e TX, 76034	CITY,	STATE:	ZIP CODE	
9	CAMPAIGN TREASURER PHONE	AREA CODE PHI (817) 913-1090	ONE NUMBER	EXTENSIO	NO			
10	CANDIDATE SIGNATURE	I am aware of the I am aware of me the Election Cod	ny responsibil					
		I am aware of the from corporation			Election C	ode on cont	ributions	
		Sign	ature of Candidat	e		02 06 20 Date Signe	24	
			до то	PAGE 2				77