FORM CFCP COVER SHEET

			1
Pursuant to chapter 258 of political committee is enco Campaign Practices. The Cauthority upon submission form. Candidates or policurrent campaign treasurer 1997, may subscribe to the	OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked		
Subscription to the Code o	of Fair Campaign Practices is voluntary.		Date Processed
1 ACCOUNT NUMBER	2 TYPE OF FILER		
(Ethics Commission Filers)	CANDIDATE X	POL	ITICAL COMMITTEE
	If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.		ng for a political committee, complete is 7 and 8, then read and sign page 2.
3 NAME OF CANDIDATE	TITLE (Dr., Mr., Ms., etc.) FIRST		Mi
(PLEASETYPE OR PRINT)	2		1
,	Den		<u></u>
	NICKNAME LAST Luster		SUFFIX (SR., JR., III, etc.)
4 TELEPHONE NUMBER OF CANDIDATE (PLEASETYPEOR PRINT)	AREA CODE PHONE NUMBER	,	EXTENSION
5 ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT)	STREET/PO BOX; APT/SUITE#; CITY	G .	STATE; ZIP CODE
6 OFFICE SOUGHT BY CANDIDATE			
(PLEASE TYPE OR PRINT)	Council Place	2	
7 NAME OF COMMITTEE (PLEASE TYPE OR PRINT)	N/A		
8 NAME OF CAMPAIGN TREASURER (PLEASE TYPE OR PRINT)	TITLE (Dr., Mr., Ms., etc.) FIRST		MI
(NICKNAME LAST		SUFFIX (SR., JR., III, etc.)
	GO TO PAGE 2		

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

	See	1 Total pages filed:		
2	CANDIDATE	MS / MRS / MR FIRST MI	OFFICE	USE ONLY
	NAME	Ben	Filer ID#	
		NICKNAME LAST SUFFIX	Date Received	
		Luster		
3	CANDIDATE MAILING	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	ADDRESS		}	
	·	· · · · · · · · · · · · · · · · · · ·	Date Hand-delivered	or Postmarked
4	CANDIDATE	APEA CODE PHONE NUMBER EXTENSION	Receipt#	Amount\$
	PHONE		Date Processed	
			-	
5	OFFICE HELD	Ca	Date Imaged	
6	(if any) OFFICE	Council Place 2		
	SOUGHT (if known)	Concil Place 2		
7	CAMPAIGN TREASURER	MS/MRS/MR FIRST MI NICKNAME	LAST	SUFFIX
	NAME	N/A		
		10/11		
8	CAMPAIGN TREASURER	STREET ADDRESS; APT / SUITE #; CITY;	STATE;	ZIP CODE
	STREET ADDRESS	1/1/1/4		
(1	residence or business)	10 171		
9	CAMPAIGN	AREA CODE PHONE NUMBER EXTENSION	**************************************	
	TREASURER PHONE	() N/A		
		7 19/11		
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Te	yas Governn	nent Code
		ram aware of the repetition bank, emaples of a of the re	,xao	nont Godo.
		I am aware of my responsibility to file timely reports as the Election Code.	required by	title 15 of
	I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.			ibutions
	1-23-24			24
		Signature of Candidate	Date Signed	
		oignatare of Gariateate		
		GO TO PAGE 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 \$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 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

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

FORM CFCP COVER SHEET

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Pursuant to chapter 258 of political committee is enco Campaign Practices. The Cauthority upon submission form. Candidates or policurrent campaign treasurer 1997, may subscribe to the Subscription to the Code of	uraged to subscribe Code may be filed work of a campaign treditical committees the appointment on file code at any time.	to the Code of Farith the proper filing easurer appointment that already have as of September	ir 1g nt a	Date Hand-delivered or Postmerked Date Processed Date Imaged
4 ACCOUNT NUMBER	2 TYPE OF FILER			
1 ACCOUNT NUMBER (Ethics Commission Filers)	CANDIDATE		POLI	ITICAL COMMITTEE
	If filing as a candidate, of then read and sign page		If filing	g for a political committee, complete 7 and 8, then read and sign page 2.
3 NAME OF CANDIDATE	TITLE (Dr., Mr., Ms., etc.)	FIRST		MI
(PLEASE TYPE OR PRINT)		KAY	,,	A,
	NICKNAME	Edwards		SUFFIX (SR., JR., III, etc.)
4 TELEPHONE NUMBER OF CANDIDATE (PLEASETYPEOR PRINT)	AREA CODE	PHONE NUMBER		EXTENSION
5 ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT)	STREET/PO BOX; APT	SUITE#; CITY;		STATE; ZIP CODE
6 OFFICE SOUGHT BY CANDIDATE (PLEASETYPEOR PRINT)	Council	Place 4	<u> </u>	
7 NAME OF COMMITTEE (PLEASETYPEOR PRINT)		Place 4 N/A		
8 NAME OF CAMPAIGN TREASURER	TITLE (Dr., Mr., Ms., etc.)	FIRST A/A		мі
(PLEASE TYPE OR PRINT)	NICKNAME	LAST		SUFFIX (SR., JR., III, etc.)
	GO TO F	PAGE 2		

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

Signature

Date

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA

See CTA Instruction Guide for detailed instructions.				1 Total pages filed:		
MS / MRS / MR FIRST MI						
2	CANDIDATE NAME	MS/MRS/MR FIRST	,	OFFIC	E USE ONLY	
	NAME	KAY	Α,	Filer ID#		
	•	NICKNAME LAST	SUFFIX	Date Received		
		Edwards				
3	CANDIDATE	ADDRESS / PO BOX; APT / SUITE #; CITY; STA'	TE; ZIP CODE	-		
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	ADDICEGO			Date Hand-delivered	or Postmarked	
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6	OFFICE SOUGHT	010 10	11.			
	(if known)					
7	CAMPAIGN TREASURER	MS/MRS/MR FIRST MI NICE	KNAME	LAST	SUFFIX	
	NAME	N/A				
		,				
8	CAMPAIGN	STREET ADDRESS; APT / SUITE #; CITY	/ ;	STATE;	ZIP CODE	
	TREASURER STREET					
	ADDRESS	N/A				
	(residence or business)	,				
9	CAMPAIGN	AREA CODE PHONE NUMBER EXT	ENSION			
	TREASURER PHONE	// \ \ //.				
		() W/A				
10	CANDIDATE					
	SIGNATURE	I am aware of the Nepotism Law, Chapter	573 of the Te	exas Governi	ment Code.	
		7, 171, 1, 51, 45, -	-1		· title 15 of	
		I am aware of my responsibility to file time the Election Code.	ely reports a	s required by	ride 1501	
		I am aware of the restrictions in title 15 of t	he Election (Code on cont	ributions	
		from corporations and labor organizations.				
		I A X X X		7-6-202	4	
		Signature of Candidate		Date Signe		
		Signature of Candidate		Date Oight		
	GO TO PAGE 2					

11 CANDIDATE NAME	RAY A. Edwards
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. ••
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	Year of election(s) or election cycle to which declaration applies Signature of Candidate

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FORM CFCP COVER SHEET

	1 0 50 0			OFFICE USE ONLY		
Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time. Subscription to the Code of Fair Campaign Practices is voluntary.				Date Hand-delivered or Postmarked Date Processed		
				Date Imaged		
1	ACCOUNT NUMBER (Ethics Commission Filers)	2 TYPE OF FILER CANDIDATE If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.	If filin	ITICAL COMMIT og for a political com s 7 and 8, then read	mittee, complete	
3	NAME OF CANDIDATE (PLEASE TYPE OR PRINT)	TITLE (Dr., Mr., Ms., etc.) NICKNAME LAST AVQAGE TITLE (Dr., Mr., Ms., etc.) FIRST MAYQUYET AVQAGE TO		MI Tran suffix(sr., jr	., III, etc.)	
4	TELEPHONE NUMBER OF CANDIDATE (PLEASETYPE OR PRINT)	AREA CODE PHONE NUMBER (919) 402-1337		EXTENSION		
5	ADDRESS OF CANDIDATE (PLEASE TYPE OR PRINT)	STREET/PO BOX; APT/SUITE#; CITY	4	STATE;	ZIP CODE	
6	OFFICE SOUGHT BY CANDIDATE (PLEASETYPE OR PRINT)	-		1	,	
7	NAME OF COMMITTEE (PLEASE TYPE OR PRINT)				_	

GO TO PAGE 2

TITLE (Dr., Mr., Ms., etc.)

NICKNAME

8 NAME OF CAMPAIGN TREASURER (PLEASETYPE OR PRINT) FIRST

LAST

Mi

SUFFIX (SR., JR., III, elb.)

There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

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- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
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- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.
- I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

Margarut Kalyangio 1/18/2029

Signature Date

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA PG 1

See CTA Instruction Guide for detailed instructions.					1 Total pages file	1 Total pages filed:	
2	CANDIDATE	MS/MRS/MR	FIRST		MI	OFFICI	E USE ONLY
	NAME		Mar	garet	F.	Filer ID#	
		NICKNAME	LAST		SUFFIX	Date Received	
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3	CANDIDATE	ADDRESS / PO BOX;	APT / SUITE #;	CHTX	STATE; ZIP CODE]	
	MAILING ADDRESS	!				*	
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	HELD (if any)	Lourci	THACE	<i>\Phi</i>			
6	OFFICE SOUGHT	Counc	Place I Place	6			
	(if known)	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX
′	CAMPAIGN TREASURER						
	NAME						
		STREET ADDRESS;	ADT	/SUITE#;	CITY;	STATE;	ZIP CODE
8	CAMPAIGN TREASURER	STREET ADDRESS,	VET	7 3011 2 11,	Sit 1,	OIAIL,	ZII GODE
	STREET ADDRESS						
(residence or business)						
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9	CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER		EXTENSION		
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	CANDIDATE						
10	CANDIDATE SIGNATURE	l am aware	of the Nepotism	Law, Cha	pter 573 of the Te	exas Governr	ment Code.
		Lam awara	of my responsit	vility to file	timely reports a	s required by	title 15 of
		the Election		omity to me	unely reports a	a required by	titie 10 of
					of the Election (Code on cont	ributions
		trom corpora	ations and labor	organizati	ons.	. 1	
		~~~	and X	1 man		1/3/	Mcre
		· · · )CAXC	Signature of Candid	ate	_	Date Signe	M 1
			COT	O 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. ••		
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	Year of election(s) or election cycle to which declaration applies  MOQUIT Soluction  Signature of Candidate		

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or mail to

Texas Ethics Commission

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Austin, TX 78711-2070

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