

**AMENDMENT: APPOINTMENT OF A
CAMPAIGN TREASURER BY A CANDIDATE**

3676 FORM ACTA

PG 1

1 CANDIDATE NAME Todd Baxter	2 ACCOUNT #	3 Total pages filed:																						
See ACTA INSTRUCTION GUIDE for detailed instructions. Use this form for changes to existing information <i>only</i> . Do not provide information previously disclosed.																								
4 CANDIDATE NAME	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;"><input type="checkbox"/> NEW</td> <td style="width:15%;">TITLE</td> <td style="width:15%;">FIRST</td> <td style="width:15%;">MI</td> <td colspan="2"></td> </tr> <tr> <td colspan="6" style="border-top: 1px dashed black;"></td> </tr> <tr> <td></td> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> <td colspan="2"></td> </tr> </table>	<input type="checkbox"/> NEW	TITLE	FIRST	MI										NICKNAME	LAST	SUFFIX			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: center; padding: 2px;">OFFICE USE ONLY</th> </tr> <tr> <td style="text-align: center; padding: 5px;"> <div style="font-size: 1.5em; font-weight: bold; margin: 0;">FILED</div> <div style="font-size: 1.2em; margin: 0;">JAN 9 3 32 PM '98</div> <div style="font-size: 0.8em; margin: 0;"> Travis County Clerk's Office </div> </td> </tr> <tr> <td style="padding: 2px;"> Receipt # _____ Amount _____ </td> </tr> <tr> <td style="padding: 2px;"> Date Processed _____ </td> </tr> </table>	OFFICE USE ONLY	<div style="font-size: 1.5em; font-weight: bold; margin: 0;">FILED</div> <div style="font-size: 1.2em; margin: 0;">JAN 9 3 32 PM '98</div> <div style="font-size: 0.8em; margin: 0;"> Travis County Clerk's Office </div>	Receipt # _____ Amount _____	Date Processed _____
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5 CANDIDATE MAILING ADDRESS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;"><input type="checkbox"/> NEW</td> <td style="width:20%;">ADDRESS / PO BOX:</td> <td style="width:15%;">APT / SUITE #:</td> <td style="width:15%;">CITY:</td> <td style="width:15%;">STATE:</td> <td style="width:25%;">ZIP CODE</td> </tr> <tr> <td></td> <td colspan="5" style="padding: 5px;"> P.O. Box 161122 Austin, TX 78716 </td> </tr> </table>		<input type="checkbox"/> NEW	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		P.O. Box 161122 Austin, TX 78716														
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7 OFFICE SOUGHT (if known)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;"><input type="checkbox"/> NEW</td> <td colspan="5"></td> </tr> </table>	<input type="checkbox"/> NEW						Date Processed _____																
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9 CAMPAIGN TREASURER ADDRESS (Residence or business)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;"><input type="checkbox"/> NEW</td> <td style="width:40%;">STREET ADDRESS (NO PO BOX PLEASE):</td> <td style="width:15%;">APT / SUITE #:</td> <td style="width:15%;">CITY:</td> <td style="width:10%;">STATE:</td> <td style="width:15%;">ZIP CODE</td> </tr> <tr> <td colspan="6" style="height: 20px;"></td> </tr> </table>		<input type="checkbox"/> NEW	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE																
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10 CAMPAIGN TREASURER PHONE	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;"><input type="checkbox"/> NEW</td> <td style="width:15%;">AREA CODE</td> <td style="width:30%;">PHONE NUMBER</td> <td style="width:15%;">EXTENSION</td> </tr> <tr> <td></td> <td style="text-align: center;">()</td> <td></td> <td></td> </tr> </table>		<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION		()																
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	()																							
11 CANDIDATE SIGNATURE	The information provided on this form is accurate and complete. <div style="text-align: center; margin-top: 20px;"> <hr style="width: 100%; border: 0.5px solid black;"/> Signature of Candidate </div>																							

GO TO PAGE 2

AMENDMENT: CANDIDATE MODIFIED REPORTING DECLARATION

FORM ACTA
PG 2

12 CANDIDATE NAME

13

NEW

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 \$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.

Date 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.

