

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

**8923**

**FORM ACTA  
PG 1**

<b>1 CANDIDATE NAME</b> Joe Garza Martinez	<b>2 ACCOUNT #</b> 21500801	<b>3 Total pages filed:</b> 1
---	--------------------------------	----------------------------------

**See ACTA Instruction Guide for detailed instructions.  
Use this form for changes to existing information only. Do not provide information previously disclosed.**

<b>4 CANDIDATE NAME</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>MS/MRS/MR</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td></td> <td></td> <td>Joe</td> <td>G.</td> </tr> <tr> <td></td> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td></td> <td>MARTINEZ</td> <td></td> </tr> </table>	<input type="checkbox"/> NEW	MS/MRS/MR	FIRST	MI			Joe	G.		NICKNAME	LAST	SUFFIX			MARTINEZ		<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Postmarked Date Processed Date Imaged
<input type="checkbox"/> NEW	MS/MRS/MR	FIRST	MI															
		Joe	G.															
	NICKNAME	LAST	SUFFIX															
		MARTINEZ																

<b>5 CANDIDATE MAILING ADDRESS</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>ADDRESS / PO BOX:</td> <td>APT / SUITE #:</td> <td>CITY:</td> <td>STATE:</td> <td>ZIP CODE</td> </tr> <tr> <td></td> <td>P.O. Box 203633</td> <td></td> <td>Austin</td> <td>TX</td> <td>78728</td> </tr> </table>	<input type="checkbox"/> NEW	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		P.O. Box 203633		Austin	TX	78728	(Continued from previous page)
<input type="checkbox"/> NEW	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE									
	P.O. Box 203633		Austin	TX	78728									

<b>6 CANDIDATE PHONE</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>AREA CODE</td> <td>PHONE NUMBER</td> <td>EXTENSION</td> </tr> <tr> <td></td> <td>(512)</td> <td>736-2767</td> <td>COE</td> </tr> </table>	<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION		(512)	736-2767	COE	(Continued from previous page)
<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION							
	(512)	736-2767	COE							

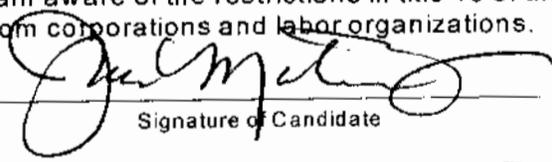
<b>7 OFFICE HELD (if any)</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td></td> </tr> </table>	<input type="checkbox"/> NEW	
<input type="checkbox"/> NEW			

<b>8 OFFICE SOUGHT (if known)</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>Sheriff</td> </tr> </table>	<input type="checkbox"/> NEW	Sheriff
<input type="checkbox"/> NEW	Sheriff		

<b>9 CAMPAIGN TREASURER NAME</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>MS/MRS/MR</td> <td>FIRST</td> <td>MI</td> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td>Mr.</td> <td>Michael</td> <td></td> <td></td> <td>Wong</td> <td></td> </tr> </table>	<input type="checkbox"/> NEW	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX		Mr.	Michael			Wong	
<input type="checkbox"/> NEW	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX									
	Mr.	Michael			Wong										

<b>10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>STREET ADDRESS (NO PO BOX PLEASE):</td> <td>APT / SUITE #:</td> <td>CITY:</td> <td>STATE:</td> <td>ZIP CODE</td> </tr> <tr> <td></td> <td>5105 Martin Ave</td> <td></td> <td>Austin TX</td> <td></td> <td>78751</td> </tr> </table>	<input type="checkbox"/> NEW	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE		5105 Martin Ave		Austin TX		78751
<input type="checkbox"/> NEW	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE								
	5105 Martin Ave		Austin TX		78751								

<b>11 CAMPAIGN TREASURER PHONE</b>	<table border="1"> <tr> <td><input type="checkbox"/> NEW</td> <td>AREA CODE</td> <td>PHONE NUMBER</td> <td>EXTENSION</td> </tr> <tr> <td></td> <td>( 512 )</td> <td>944-6370</td> <td></td> </tr> </table>	<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION		( 512 )	944-6370	
<input type="checkbox"/> NEW	AREA CODE	PHONE NUMBER	EXTENSION						
	( 512 )	944-6370							

<b>12 CANDIDATE SIGNATURE</b>	<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 align="center">                   Signature of Candidate             </p> <p align="right">                 9-27-2016                  Date Signed             </p>
-------------------------------	---

**GO TO PAGE 2**

**AMENDMENT:**  
**CANDIDATE MODIFIED REPORTING DECLARATION**

**FORM ACTA**  
**PG 2**

13 CANDIDATE  
 NAME

14 MODIFIED  
 REPORTING  
 DECLARATION

NEW

**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 \$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.

\_\_\_\_\_  
 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.**