

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

**FORM ACTA
PG 1**

1 CANDIDATE
NAME

Rafael "Rafa" Diaz Martinez Jr

2 FILER ID #

3 Total pages filed:

1

See ACTA Instruction Guide for detailed instructions.

Use this form for changes to existing information *only*. Do not provide information previously disclosed.

4 CANDIDATE
NAME

NEW

MS / MRS / MR

FIRST

MI

OFFICE USE ONLY

Date Received

NICKNAME

LAST

SUFFIX

received

5 CANDIDATE
MAILING
ADDRESS

NEW

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Date Hand-delivered or Postmarked

Receipt #

Amount \$

6 CANDIDATE
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Processed

()

Date Imaged

7 OFFICE HELD
(if any)

None

8 OFFICE
SOUGHT
(if known)

Judson ISd School Board, District 7 At Large

9 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

10 CAMPAIGN
TREASURER
STREET
ADDRESS
(residence or business)

NEW

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

11 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

()

12 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 provisions of title 15 of the Election Code on contributions~~

APPOINTMENT OF A CANDIDATE TO OFFICE BY A COUNTY BOARD OF SUPERVISORS
TREASURER

FORM C
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. Rafael Filer ID #
NICKNAME LAST SUFFIX Date Received
"Rafa" Diaz Martinez Jr

3 CANDIDATE MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
87F9 Sycamore Creek Community, TX 78109

Date Hand-delivered or Postmarked

4 CANDIDATE PHONE AREA CODE PHONE NUMBER EXTENSION Receipt # Amount \$
(512) 765-1940 Date Processed

5 OFFICE HELD Date Imaged

6 OFFICE SOUGHT (if known) Judson ISD School Board, District 4

7 CAMPAIGN MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX

NAME Mr. Akeem Brown

8 CAMPAIGN TREASURER STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE