

APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA
PG 1

See STA Instruction Guide for detailed instructions.
If you are involved in a School District Bond Election, you must file Form STA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.

1 Total pages filed: **2**

OFFICE USE ONLY

2 COMMITTEE NAME

SUPPORT THE SWAP

Filer ID #

3 COMMITTEE ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1834 WINDSONG CIR
KELLER TX 76248

Date Received

4 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
MR. MATTHEW
NICKNAME LAST SUFFIX
MUCKER

Date Hand-delivered or Postmarked

5 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1834 WINDSONG CIR
KELLER TX 76248

Receipt #

Amount \$

Date Processed

Date Imaged

6 MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

same as above

7 CAMPAIGN TREASURER PHONE

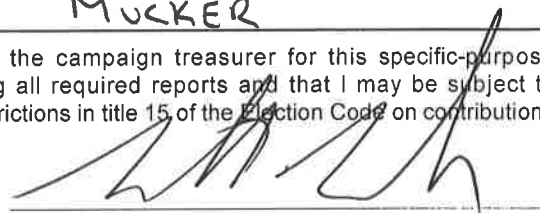
AREA CODE PHONE NUMBER EXTENSION
(214) 764-6385

8 PERSON APPOINTING TREASURER

FIRST MI LAST SUFFIX
MATTHEW MUCKER

9 SIGNATURE

I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.



Signature of Campaign Treasurer

10 ASSISTANT CAMPAIGN TREASURER (see instructions)

FIRST MI LAST SUFFIX
N/A

11 ASSISTANT CAMPAIGN TREASURER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
N/A

12 ASSISTANT CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
() N/A

CONTINUE ON PAGE 2

**SPECIFIC-PURPOSE COMMITTEE:
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA
PG 2**

13 COMMITTEE NAME

SUPPORT THE SWAP

14 COMMITTEE PURPOSE

- SUPPORT CANDIDATE
- OPPOSE CANDIDATE
- ASSIST OFFICEHOLDER

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

- SUPPORT MEASURE
- OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

PROPOSITION A

ELECTION DATE

Month / Day / Year

DESCRIPTION

Approving ad valorem tax rate of \$1.51/\$100

15 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 declaration is valid for one election cycle only. ••
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does 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. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer 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 Campaign Treasurer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED