

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.						1 Total pages filed:	
2 CANDIDATE NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	NICKNAME	LAST	SUFFIX	Filer ID #	Date Received		
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Hand-delivered or Postmarked	
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #	Amount \$	Date Processed	
5 OFFICE HELD (if any)						Date Imaged	
6 OFFICE SOUGHT (if known)	Tax Assessor						
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
10 CANDIDATE SIGNATURE	<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><u>Chelsea Bullard</u> Signature of Candidate</p> <p><u>11-03-2023</u> Date Signed</p>						
GO TO 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. ••**

•• 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 \$1,010 in political contributions
or make more than \$1,010 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

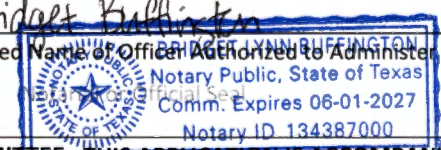
or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

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

APPLICATION FOR A PLACE ON THE GENERAL PRIMARY BALLOT

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL¹ Failure to provide required information may result in rejection of application.

APPLICATION FOR A PLACE ON THE <u>Republican</u> PARTY GENERAL PRIMARY BALLOT					
To: State/County Chair (Democratic or Republican)					
I request that my name be placed on the above-named official primary ballot as a candidate for nomination to the office indicated below.					
OFFICE SOUGHT (Include any place number or other distinguishing number, if any.) <u>Tax Assessor Collector</u>			INDICATE TERM <input checked="" type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED		INCUMBENT DECLARATION: (Check this box if you are the incumbent.) INCUMBENT <input type="checkbox"/>
FULL NAME (First, Middle, Last) <u>Chelsea Dennice Bullard</u>			PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT* <u>Chelsea Bullard</u>		
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.) <u>1214 N Ave F</u>			PUBLIC MAILING ADDRESS (Optional) (Address for which you receive campaign related correspondence, if available.) <u>1214 N Ave F</u>		
CITY <u>Denver City</u>		STATE <u>Tx</u>	ZIP <u>79323</u>	CITY <u>Denver City</u>	
STATE <u>Tx</u>		ZIP <u>79323</u>			
PUBLIC EMAIL ADDRESS (Optional) (Address for which you receive campaign related emails, if available.) <u>Chelsea-tripe10@yaho</u>		OCCUPATION (Do not leave blank) <u>HTM Clerk</u>		DATE OF BIRTH <u>01/04/1988</u>	VOTER REGISTRATION VUID NUMBER ² (Optional)
TELEPHONE CONTACT INFORMATION (Optional) Home: <u>806 332 831</u> Office: Cell: <u>806 332 831</u>					
FELONY CONVICTION STATUS (You MUST check one) <input checked="" type="checkbox"/> I have not been finally convicted of a felony. <input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. ³			LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN IN THE STATE OF TEXAS <u>32</u> year(s) ____ month(s)		
			IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED <u>32</u> year(s) ____ month(s)		
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared <u>Chelsea Bullard</u> , who being by me here and now duly sworn, upon oath says: "I, (name of candidate) <u>Chelsea Bullard</u> , of <u>Wakarusa</u> County, Texas, being a candidate for the office of <u>Tax Assessor Collector</u> , swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."					
X			<u>CB</u>		
SIGNATURE OF CANDIDATE					
Sworn to and subscribed before me this <u>30</u> day of <u>November</u> , <u>2023</u> , by <u>Chelsea Bullard</u> . (day) (month) (year) (name of candidate)					
Signature of Officer Authorized to Administer Oath ⁴ <u>Bridget Bullington</u>			Printed Name of Officer Authorized to Administer Oath <u>Bridget Bullington</u>		
Title of Officer Authorized to Administer Oath <u>notary</u>					
TO BE COMPLETED BY CHAIR OR SECRETARY OF THE COUNTY EXECUTIVE COMMITTEE. THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE PAID BY:					
<input type="checkbox"/> CASH <input checked="" type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE <input checked="" type="checkbox"/> Voter Registration Status Verified					
This document and \$ <u>750</u> filing fee or a nominating petition of _____ pages received. (See Section 1.007)					
Date Filed <u>11/30/23</u>			Signature of Chair or Designee Receiving Filed Application <u>[Signature]</u>		
Date Accepted <u>11/30/23</u> or _____			Signature of Chair or Secretary Upon Determination of Application <u>[Signature]</u>		
Date Rejected _____					