

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.

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2 CANDIDATE NAME

MS / MRS / MR FIRST MI

VICTORIA L

NICKNAME LAST SUFFIX

STIEWIG

3 CANDIDATE MAILING ADDRESS

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

1820 S. 11TH ST. PORT ARANSAS, TX
78373

4 CANDIDATE PHONE

AREA CODE PHONE NUMBER EXTENSION

(361) 746-8044

5 OFFICE HELD (if any)

6 OFFICE SOUGHT (if known)

PORT ARANSAS CITY COUNCIL PLACE 2

7 CAMPAIGN TREASURER NAME

MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX

VICTORIA L STIEWIG

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS: APT / SUITE #: CITY: STATE: ZIP CODE

1820 S. 11TH ST. PORT ARANSAS, TX 78373

9 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(361) 746-8044

10 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 restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.

Victoria Stewig
Signature of Candidate

1/18/2021
Date Signed

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