

# 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

KELLY

F

NICKNAME

LAST

SUFFIX

OWENS

OFFICE USE ONLY

File ID #

Date Received

3 CANDIDATE  
MAILING  
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

551 LA COSTA CAY

PORT ARANSAS, TX 78373

Date Hand-delivered or Postmarked

4 CANDIDATE  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(361) 749-5597

Receipt #

Amount \$

Date Processed

5 OFFICE  
HELD  
(if any)

Date Imaged

6 OFFICE  
SOUGHT  
(if known)

PORT ARANSAS CITY COUNCIL PLACE 2

7 CAMPAIGN  
TREASURER  
NAME

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

KELLY F OWENS

8 CAMPAIGN  
TREASURER  
STREET  
ADDRESS  
(residence or business)

STREET ADDRESS:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

551 LA COSTA CAY

PORT ARANSAS, TX 78373

9 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(361) 749-5597

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.

Signature of Candidate

Date Signed

GO TO PAGE 2