APPOINTMENT OF A CAMPAIGN TREASURER FORM CTA BY A CANDIDATE

PG 1

See CTA Instruction Guide for detailed instructions.			1 Total pages filed:
2	CANDIDATE NAME	MS/MRS(MR) FIRST Earl MI	OFFICE USE ONLY
		nickname Last Suffix Thomas	Date Received
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1963 Life Ave	Date Hand-delivered or Postmarked
4	CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 403-6156	Receipt # Amount \$
5	OFFICE HELD (if any)		Date Imaged
6	OFFICE SOUGHT (if known)	City Council District 6	6
7	CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME Earlyshia O TI	LAST SUFFIX
8	CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; 1963 Life Ave Dallas	STATE; ZIP CODE
9	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 923-9315	
10	CANDIDATE SIGNATURE		
		I am aware of the restrictions in title 15 of the Election C from corporations and labor organizations.	ode on contributions
		Signature of Candidate	/- 23- 20 Date Signed
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