## APPOINTMENT OF A CAMPAIGN TREASURER **3Y A CANDIDATE**

FORM CTA PG 1

See CTA Instruction Guide for detailed instructions.				1 Total pages filed:	
CANDIDATE NAME	MS/MRS/MR FIRST MI  Ar. Leonard  NICKNAME LAST SUFFIX		OFFICE USE ONLY Filer ID #  Date Received		
CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE	Date Hand-delivered or Postmarked		
			Date Hand-delivered	or Posimarked	
CANDIDATE PHONE	AREA CODE PHONE NUMBER	EXTENSION	Receipt#	Amount\$	
	(817) 269-3007		Date Processed		
OFFICE HELD (if any)			Date Imaged		
OFFICE SOUGHT (if known)	City Councilmenter Prestrict 7				
' CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX  PAX Ston Molderal				
CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE  [410 Washington Terrace  Fart Worth, TX 76107				
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
	(817) 312-023/			····,	
O 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.				
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