

APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

FORM STA
PG 1

See STA Instruction Guide for detailed instructions.
If you are involved in a School District Bond Election, you must file Form STA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.

1 Total pages filed:

3

2 COMMITTEE NAME	Families For EMS Bond						OFFICE USE ONLY	
3 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO 79361 Saginaw TX 76179							
4 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Donna K Webb NICKNAME LAST SUFFIX						Date Received <i>Rec'd 8/31/2023 RW</i>	
5 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE 800 Kingsbrook Lane Saginaw TX 76179							
6 MAILING ADDRESS <input type="checkbox"/> same as above	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE						Receipt # Amount \$ <i>N/A</i> <i>0</i>	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 946-6924						Date Processed <i>8/31/2023</i>	
8 PERSON APPOINTING TREASURER	FIRST MI LAST SUFFIX Ashley Newhart						Date Imaged <i>8/31/2023</i>	
9 SIGNATURE	I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations. <i>Donna K. Webb</i> Signature of Campaign Treasurer							
10 ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST MI LAST SUFFIX NA							
11 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE NA							
12 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ()							

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**SPECIFIC-PURPOSE COMMITTEE:
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM STA
PG 2**

13 COMMITTEE NAME

Families For EMS Bond

14 COMMITTEE
PURPOSE

CANDIDATE / OFFICEHOLDER NAME

EMS ISD Bond 2023

SUPPORT CANDIDATE

OPPOSE CANDIDATE

ASSIST OFFICEHOLDER

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

SUPPORT MEASURE

OPPOSE MEASURE

BALLOT IDENTIFICATION OF MEASURE / #

EMS ISD BOND PROPOSITION A-D

ELECTION DATE

Month / Day / Year
11/07/2023

DESCRIPTION

EMS ISD Bond Proposition A-D

15 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 declaration is valid for one election cycle only. ••
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does 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. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer 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 Campaign Treasurer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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>

This appointment is effective on the date it is filed with the appropriate filing authority.

**SPECIFIC-PURPOSE COMMITTEE:
STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES
FROM CORPORATION OR LABOR ORGANIZATION POLITICAL
CONTRIBUTIONS UNDER SECTION 252.0031, ELECTION CODE**

**FORM STA
PG 3**

16 COMMITTEE
NAME

Families For EMS Bond

17 AFFIRMATION
(If applicable)

I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct:

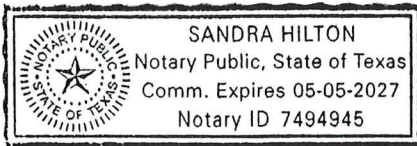


(Check if applicable)

The political committee named above is not established or controlled by a candidate or an officeholder, and will not use any political contribution from a corporation or a labor organization to make a political contribution to: (1) a candidate for elective office or an officeholder, or (2) a political committee that has not included in its campaign treasurer appointment a Statement Authorizing Direct Campaign Expenditures from Corporation or Labor Organization Political Contributions declaring the same.

PLEASE COMPLETE EITHER OPTION (1) OR (2) BELOW:

(1) **Affidavit Jurat:**



Notary Stamp/Seal

Ashley Newhart
Signature of Committee Representative

Sworn to and subscribed before me by Ashley Newhart, this the 31 day of August, 2023, to certify which, witness my hand and seal of office.

Sandra Hilton
Signature of officer administering oath

Sandra Hilton
Printed Name of officer administering oath

Notary
Title of officer administering oath

OR

2) **Unsworn Declaration Jurat:**

My name is _____, and my date of birth is _____.

My Address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.

Signature of Committee Representative (Declarant)

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