

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

11 CANDIDATE
NAME

Aly Tschoepe

12 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 option is valid for one election cycle only. ****
(An election cycle includes a primary election, a general election, and any related runoffs.)

**** Candidates for the office of state chair of a political party
may NOT choose modified reporting. ****

I do not intend to accept more than \$500 in political contributions or
make more than \$500 in political expenditures (excluding filing fees)
in connection with any future election within the election cycle.
I understand that if either one of those limits is exceeded, I will be
required to file pre-election reports and, if necessary, a runoff
report.

2020

Year of election(s) or election cycle to
which declaration applies

[Signature]
Signature of Candidate

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

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>

**CANDIDATE MODIFIED
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**FORM CTA
PG 2**

11 CANDIDATE
NAME

William Griffin

12 MODIFIED
REPORTING
DECLARATION

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2020-2023

Year of election(s) or election cycle to
which declaration applies

William Griffin
Signature of Candidate

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**CANDIDATE MODIFIED
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FORM CTA
PG 2

11 CANDIDATE
NAME

Chris Villasana

12 MODIFIED
REPORTING
DECLARATION

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2020

Year of election(s) or election cycle to
which declaration applies



Signature of Candidate

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | | | | | |
|--|--|--|----------------------|-----------|-----------|----------------|--|-------------|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / <input checked="" type="radio"/> MRS / MR FIRST MI <p style="text-align: center;">Loyce G</p> | OFFICE USE ONLY <hr/> Date Received <hr/> Date Hand-delivered or Date Postmarked <table style="width:100%;"><tr><td style="width:50%;">Receipt #</td><td style="width:50%;">Amount \$</td></tr><tr><td colspan="2">Date Processed</td></tr><tr><td colspan="2">Date Imaged</td></tr></table> | | Receipt # | Amount \$ | Date Processed | | Date Imaged | |
| | Receipt # | | | Amount \$ | | | | | |
| Date Processed | | | | | | | | | |
| Date Imaged | | | | | | | | | |
| NICKNAME LAST SUFFIX <p style="text-align: center;">Rice</p> | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <p style="text-align: center;">500 CR 113 NIXON, TX 78140</p> | | | | | | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE PHONE NUMBER EXTENSION <p style="text-align: center;">(830) 582-2233</p> | | | | | | | | |
| 6 CAMPAIGN TREASURER NAME | MS / <input checked="" type="radio"/> MRS / MR FIRST MI <p style="text-align: center;">Loyce G</p> | | | | | | | | |
| | NICKNAME LAST SUFFIX <p style="text-align: center;">Rice</p> | | | | | | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <p style="text-align: center;">500 CR 113 Nixon TX 78140</p> | | | | | | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION <p style="text-align: center;">(830) 582-2233</p> | | | | | | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | | | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year / / / / / | | | | | | | | |
| 11 ELECTION | ELECTION DATE Month Day Year <p style="text-align: center;">4 / 28 / 20</p> | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special | | | | | | | |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) | | | | | | | |

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