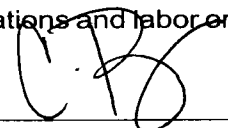


# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

|                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                |        |                 |                      |                                                                                                                                                                                                                                                              |
|-------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|--------|-----------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| See CTA Instruction Guide for detailed instructions.        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                |        |                 | 1 Total pages filed: |                                                                                                                                                                                                                                                              |
| 2 CANDIDATE NAME                                            | MS / MRS / MR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | FIRST          | MI     | OFFICE USE ONLY |                      |                                                                                                                                                                                                                                                              |
|                                                             | NICKNAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | LAST           | SUFFIX | Filer ID #      |                      |                                                                                                                                                                                                                                                              |
| 3 CANDIDATE MAILING ADDRESS                                 | ADDRESS / PO BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | APT / SUITE #: | CITY:  | STATE:          | ZIP CODE             | <div style="border: 2px solid black; padding: 5px;"> <b>FILED FOR RECORD</b><br/> <i>November 4, 2025</i><br/> AT <u>3:09</u> O'CLOCK <u>PM</u><br/> <b>JANA UNDERWOOD</b><br/> County Clerk, Borden Co. Tex<br/> Date filed delivered and Postmarked </div> |
| 4 CANDIDATE PHONE                                           | AREA CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PHONE NUMBER   |        | EXTENSION       |                      |                                                                                                                                                                                                                                                              |
| 5 OFFICE HELD (if any)                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                |        |                 |                      |                                                                                                                                                                                                                                                              |
| 6 OFFICE SOUGHT (if known)                                  | Justice of the Peace                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                |        |                 |                      |                                                                                                                                                                                                                                                              |
| 7 CAMPAIGN TREASURER NAME                                   | MS/MRS/MR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | FIRST          | MI     | NICKNAME        | LAST                 | SUFFIX                                                                                                                                                                                                                                                       |
| 8 CAMPAIGN TREASURER STREET ADDRESS (residence or business) | STREET ADDRESS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | APT / SUITE #: |        | CITY:           | STATE:               | ZIP CODE                                                                                                                                                                                                                                                     |
| 9 CAMPAIGN TREASURER PHONE                                  | AREA CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | PHONE NUMBER   |        | EXTENSION       |                      |                                                                                                                                                                                                                                                              |
| 10 CANDIDATE SIGNATURE                                      | <p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <br/> Signature of Candidate </div> <div style="text-align: center;"> <u>11-4-25</u><br/> Date Signed </div> </div> |  |                |        |                 |                      |                                                                                                                                                                                                                                                              |

GO TO PAGE 2

**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

**11 CANDIDATE  
NAME**

Carol Bridgeman

**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 \$1,110 in political contributions or  
make more than \$1,110 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.

2024

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

CB

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](mailto: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>