APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

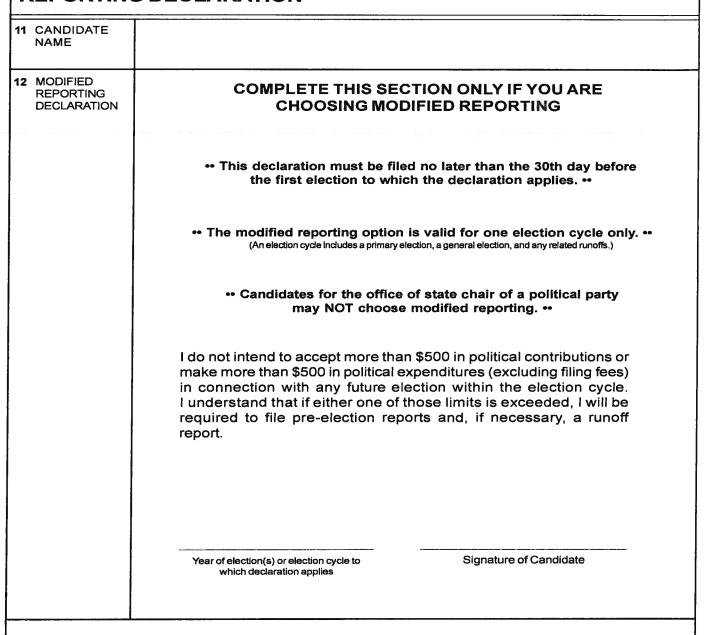
FORM CTA PG 1

Se	ee CTA Instruction Guide for detailed instructions.	1 Total pages filed:
2 CANDIDATE	MS / MRS / MR FIRST MI	OFFICE USE ONLY
NAME	NICKNAME KALTIL SUFFIX	Acct. #
	Crownover	Date Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE	OCT -
	106 CR 144 Marbiu Falls Ty 7869	2 A
4 CANDIDATE PHONE	(\$30)613-0156	Date Hand-delivered or Postmarked Date Processed S
	1800/10/0100	Date Imaged
5 OFFICE HELD (If any)	County Treasurer	Date imaged
6 OFFICE SOUGHT (if known)	County Treasurer	
7 CAMPAIGN TREASURER NAME	MS/MRS/MR J FIRST MI NICKNAME	LAST SUFFIX
	Karrie S. Crownor	Ver
8 CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE
(residence or business)	106 CR 144 Marble Falls,	TV 78454
9 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER EXTENSION	
PHONE	(830) 613-0156	
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Tex	xas Government Code.
	I am aware of my responsibility to file timely reports as the Election Code.	required by title 15 of
	I am aware of the restrictions in title 15 of the Election Confirm corporations and labor organizations.	ode on contributions
	Signature of Candidate	Date Signed
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E.

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2



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