2		1 Total pages filed:				
	CANDIDATE NAME	MS/MRS/MR FRST			М	OFFICE USE ONLY
		NICKNAME LAST	EVILLE		SUFFIX	DEC 0 8 2025
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #:	CITY	STATE	ZIP GOD€	By: V-BC Date Hand-delivered or Postmarked
4	CANDIDATE	MEA CODE PHONE NUMBER	R .	EXTENSIO	DN .	Paceipts 2-8-25 means of clock 12-3 Date NORMA G. EDISON Date Proposed Administrator Golder County Bottoms Administrator Golder County Bottoms Administrator Golder County
5	OFFICE HELD (if any)					Date Imaged
6	OFFICE SOUGHT (If known)	COUNTY	JUDG	E		
7	CAMPAIGN TREASURER NAME	& Etica Ped	wille	NICKNAME	nit w	LAST SUFFIX
	CAMPAIGN TREASURER STREET ADDRESS	STRIET ADDRESS	APT / BUITE #	CITY.	+	STATE ZIP CODE
9	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBE	R	EXTENSIO	N.	
10	CANDIDATE SIGNATURE	CONTACTOR DESCRIPTION AND DISTOR	onsibility to fil	e timely	reports a	exas Government Code. as required by title 15 of Code on contributions
		Cy Per	-			12 / 8/ 25 Date Signed

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11 CANDIDATE NAME 12 MODIFIED COMPLETE THIS SECTION ONLY IF YOU ARE REPORTING CHOOSING MODIFIED REPORTING DECLARATION .. 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. ear of election(s) or election cycle to which declaration applie

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