	See	1 Total pages filed:	
2	CANDIDATE NAME	MS/MRS/MR FIRST DAVID	OFFICE USE ONLY
		NICKNAME Bruns	BUFFOX DIRECEIVED
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE	By: KBC Date Hand-delivered or Postmarked
4	CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTER	PILED Recupt # 12-08-2025 Amartis O'Clock 8: 31 Date Date PINGRMA G. EDISON Elections Administrator Goliad County Tex
5	OFFICE HELD (if any)		600 may stat College Dept
6	OFFICE SOUGHT (if known)	county Judge GoliA	d
7	CAMPAIGN TREASURER NAME	County Judge Golia MEMBRIME Lesley K B	FUNS
	CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT / SUITE #; CITY;	STATE; ZIP CODE
9	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTE	NSION
10	CANDIDATE	I am aware of the Nepotism Law, Chapter I am aware of my responsibility to file time the Election Code. I am aware of the restrictions in title 15 of the from corporations and labor organizations. Signature of Candidate	ely reports as required by title 15 of the Election Code on contributions

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA PG 2

11	CANDIDATE NAME	David L. Bruns		
12	REPORTING NOITARALDED	COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING		
	DEC D 8 2025	the first election to which	d no later than the 30th day before h the declaration applies. ••	
	(7/E)F=		is valid for one election cycle only. ** ction, a general election, and any related runoffs.)	
	MORIDS TO AMBONI VIOLENCE CARECONNECTOR	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.		
		Year of election(s) or election cycle to which declaration applies	Signature of Candidate	
		which declaration applies		

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