# APPOINTMENT OF A CAMPAIGN TREASURER BY A SPECIFIC-PURPOSE COMMITTEE

## FORM STA PG 1

See STA Instruction Guide for detailed instructions.  If you are involved in a School District Bond Election, you must file Form STA with the local filing authority BEFORE sending a file-stamped copy to the Texas Ethics Commission.							1 Total pages filed:		
2	COMMITTEE NAME	Safety First Frisco				OFFICE USE ONLY			
		4 DDDECC / DO BOY:			07475	0005	Filer ID #		
3	COMMITTEE ADDRESS	ADDRESS / PO BOX;	APT/SUITE#;	CITY;	STATE; ZII	P CODE	Pate Received RECEIVED  NOV 0 8 2023		
4	CAMPAIGN TREASURER NAME	MS/MRS/MR Mr. NICKNAME	RichardLAST Peasley		MI · · · · · · · · · · · · · · · · · · ·	 IFFIX	CITY SECRETARY'S OFFICE  Date Hand-delivered or Postmarked		
5	CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; 7094 Bay Hil	APT / SUITE #		STATE; ZIF	P CODE	Receipt #  Date Processed  Date Imaged	Amount\$	
6	MAILING ADDRESS  same as above	ADDRESS / PO BOX; 3245 Main St	APT/SUITE#; treet STE 235 P	сіту; РМВ 517, І		75034	ļ		
7	CAMPAIGN TREASURER PHONE	AREA CODE ( 469 )	PHONE NUMBER 964-6892		EXTENSION				
8	PERSON APPOINTING TREASURER	E. Michael		MI	Simps	ist on		SUFFIX	
9	SIGNATURE	committee and fines for failure	that I am respons to do so. I am awa	at I have been appointed as the campaign treasurer for this specific-purpose that I am responsible for filing all required reports and that I may be subject to o do so. I am aware of the restrictions in title 15 of the Election Code on contributions and labor organizations.  Signalure of Campaign Treasurer					
10	ASSISTANT CAMPAIGN TREASURER (see instructions)	FIRST		МІ	LA	ST		SUFFIX	
11	ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX;	APT/SUITE#;	- 4	CITY;		STATE;	ZIP CODE	
12	ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION				
CONTINUE ON PAGE 2									

### **SPECIFIC-PURPOSE COMMITTEE:**

### PURPOSE AND MODIFIED REPORTING DECLARATION

FORM STA PG 2

13 COMMITTEE NAME							
Safety First Frisco							
14 COMMITTEE PURPOSE	CANDIDATE / OFFICEHOLDER NAME						
SUPPORT CANDIDATE							
OPPOSE CANDIDATE	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)						
ASSIST OFFICEHOLDER							
	BALLOT IDENTIFICATION OF MEASURE / #	ELECTION DATE					
SUPPORT MEASURE	Civil Service/Collective Bargaining	Month Day Year 05/04/2024					
OPPOSE MEASURE	DESCRIPTION						
	Citizens opposing Civil Service and Collective Bar	gaining in Frisco, TX					
15 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 declaration is valid for one election cycle only. ••  (An election cycle includes a primary election, a general election, and any related runoffs.)						
	The committee does not intend to accept more that contributions or make more than \$1,010 in political fees) in connection with any future election within the committee understands that if either one of those ling committee's campaign treasurer will be required to and, if necessary, a runoff report.	expenditures (excluding filing the election cycle. The mits is exceeded, the					
	Year of election(s) or election cycle to Signature which declaration applies	e of Campaign Treasurer					

#### ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

TEC Filers may send this form to the TEC electronically at <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>

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

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

## **SPECIFIC-PURPOSE COMMITTEE:**

FORM STA

STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES FROM CORPORATION OR LABOR ORGANIZATION POLITICAL **CONTRIBUTIONS UNDER SECTION 252.0031, ELECTION CODE** 

PG 3

16 COMMITTEE NAME	Safety First Frisco					
17 AFFIRMATION (If applicable)	I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct:					
officehol organiza (Check if an offic applicable) appointr	itical committee named above is not established or controlled by a candidate or an der, and will not use any political contribution from a corporation or a laboration to make a political contribution to: (1) a candidate for elective office or eholder, or (2) a political committee that has not included in its campaign treasurer nent a Statement Authorizing Direct Campaign Expenditures from Corporation or Laboration Political Contributions declaring the same.					
PLEASE COMPLETE <u>EITHER</u> OPTION (1) OR (2) BELOW:						
(1) Affidavit Jurat:						
	Signature of Committee Representative					
Notary S	Stamp/Seal					
Sworn to and subscribed before me by, this the day of,  20, to certify which, witness my hand and seal of office.						
Signature of officer adm	inistering oath Printed Name of officer administering oath Title of officer administering oath					
OR						
2) Unsworn De	claration Jurat:					
My name is <u>E. /</u>	Michael Simpson, and my date of birth is					
My Address is	(street) (city) (state) (zip code) $\frac{USA}{(country)}$					
Executed in	County, State of <u>Texas</u> , on the <u>5th</u> day of <u>Nov</u> , 20 <u>23</u> .  Signature of Committee Representative (Declarant)					
	form to the TEC electronically at state.tx.us or by mail to: Texas  Non-TEC Filers must file this form					

Ethics Commission, P.O. Box 12070, Austin, TX 78711-2070

with the local filing authority