

**AMENDMENT: APPOINTMENT OF A
CAMPAIGN TREASURER BY A CANDIDATE**

**FORM ACTA
PG 1**

1 CANDIDATE NAME	2 FILER ID #	3 Total pages filed:
------------------	--------------	----------------------

See ACTA instruction Guide for detailed instructions.
Use this form for changes to existing information only. Do not provide information previously disclosed.

4 CANDIDATE NAME	NEW	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	BILLY HEFNER NICKNAME LAST SUFFIX					Date Received FILED FOR RECORD COLORADO COUNTY, TX 2017 NOV 13 AM 11:38 Date Hand delivered or Postmarked KIMBERLY MENKE Receipt # COUNTY CLERK
5 CANDIDATE MAILING ADDRESS	NEW	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	7130 HIWAY 71 GARWOOD, TX 77442					
6 CANDIDATE PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION		
	(979) 758-4068					

7 OFFICE HELD (if any)	NEW	JP 1
------------------------	-----	------

8 OFFICE SOUGHT (if known)	NEW	JP 1
----------------------------	-----	------

9 CAMPAIGN TREASURER NAME	NEW	MS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
	JESSY E. HEFNER						

10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	NEW	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	7130 HIWAY 71 GARWOOD, TX 77442					

11 CAMPAIGN TREASURER PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION
	(979) 758-4907			

12 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code. I am aware of my responsibility to file timely reports as required by title 15 of the Election Code. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.	
	<u>Billy Hefer</u> Signature of Candidate	11-13-2017 Date Signed

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI BILLY NICKNAME LAST SUFFIX HEFNER	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 7130 HIWAY 71 GARWOOD, TX 77442	Date Received FILED FOR RECORD COLORADO COUNTY, TX 2018 FEB -1 AM 11:53 KIMBERLY MENKE COUNTY CLERK Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 758-4068	Receipt #	Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI JESSIE HEFNER NICKNAME LAST SUFFIX	Date Processed	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 7130 HIWAY 71 GARWOOD, TX 77442		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () 979 - 758 - 490 4907		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 1 / 15 / 2018 THROUGH 2 / 1 / 2018		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) JPI COLORADO COUNTY	13 OFFICE SOUGHT (if known)	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Billy DEFNER

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 490

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

OUTSTANDING
LOAN TOTALS

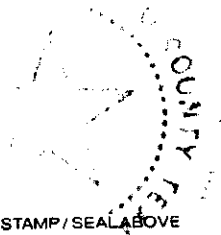
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Billy Defner
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Billy DEFNER, this the 1st day of February, 2018, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

TEAN PERKINS
Printed name of officer administering oath

Chief Deputy / Early Voting Clerk
Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME BILLY HEFUER	3 Filer ID (Ethics Commission Filers)
---------------------------	-------------------------------------	---------------------------------------

4 Date	5 Payee name
--------	--------------

6 Amount (\$) 375 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) REPUBLICAN PARTY	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 1-20-2018	Payee name COLORADO COUNTY CITIZEN
--------------------------	--

Amount (\$) 115 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) AD	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name BILLY HEFUER	Office sought JPI	Office held JPI
---	--	-----------------------------	---------------------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 #	Date Received
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Postmarked	
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt #	Amount \$
5 OFFICE HELD (if any)		Date Processed	Date Imaged
6 OFFICE SOUGHT (if known)			
7 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX		
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 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> <p><u>Billy Hefner</u> Signature of Candidate</p> <p>11-23-2021 Date Signed</p>		

GO TO PAGE 2

**CANDIDATE MODIFIED
REPORTING DECLARATION**

**FORM CTA
PG 2**

11 CANDIDATE
NAME

BILLY HEFNER

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. ****

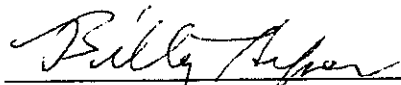
**** The modified reporting option is valid for one election cycle only. ****
(An election cycle includes a primary election, a general election, and any related runoffs.)

**** Candidates for the office of state chair of a political party
may NOT choose modified reporting. ****

I do not intend to accept more than \$500 in political contributions or
make more than \$500 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.

2022

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



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
or mail to

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

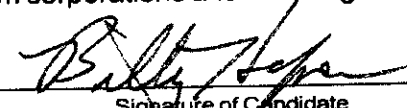
Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to:
<http://204.65.203.6/filinginfo/QuickFileAReport.php>

APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

COPY

FORM CTA
PG 1

See CTA Instruction Guide for detailed instructions.						1	Total pages filed:
2	CANDIDATE NAME	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
		BILLY HEFNER					
3	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE	
		7130 HIWAY 71 GARWOOD TX 77442					
4	CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	HD/PM		
		(979) 758-4068			Date Processed		
5	OFFICE HELD (if any)	JP 1					
6	OFFICE SOUGHT (if known)	JP 1					
7	CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
		JESSYE E HEFNER					
8	CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY:	STATE:	ZIP CODE	
		7130 HIWAY 71 GARWOOD, TX 77442					
9	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Imaged		
		(979) 758-4907			Date Processed		
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.					
		I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.					
		I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.					
		 Signature of Candidate				9-4-2013 Date Signed	

FILED FOR RECORD
 COLORADO COUNTY
 2013 OCT -4 AM 11:23
 DARLENE HAYEK
 COLORADO COUNTY

GO TO PAGE 2

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 NICKNAME FIRST LAST MI SUFFIX	OFFICE USE ONLY	
		Acct. #	FILED FOR RECORD COLORADO COUNTY, TX
3	CANDIDATE MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Received	2013 OCT -4 AM 11: 23
			DARLENE HAYEK COLORADO COUNTY, TX
4	CANDIDATE PHONE AREA CODE PHONE NUMBER EXTENSION	HD/PM	
		Date Processed	
5	OFFICE HELD (if any)	Date Imaged	
6	OFFICE SOUGHT (if known)		
7	CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX		
		JESSYE E HEFNER	
8	CAMPAIGN TREASURER STREET ADDRESS (Residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
		7130 HIWAY 71 GARWOOD, TX 77442	
9	CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION		
		(979) 758-4907 #	
10	CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.	
		I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.	
		I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.	
		Signature of Candidate	9-4-2013 Date Signed
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR / MISS FIRST MI <i>BILLY HEFNER</i> NICKNAME LAST SUFFIX	OFFICE USE ONLY Date Received FILED FOR RECORD COLORADO STATE 2013 DEC 16 AM 9:07 Date Hand-delivered or Date Postmarked CARLENE MAYLA COLORADO STATE DEPT OF Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>7130 HIWAY 71 GARWOOD, TX 77442</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(979) 758 4068</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR / MISS FIRST MI <i>JESSY E. HEFNER</i> NICKNAME LAST SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>7130 HIWAY 71 GARWOOD, TX 77442</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(979) 758 - 4907</i>		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>10 / 4 / 2013 01 / 15 / 2014</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>11 / / 2014</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <i>JUSTICE OF THE PEACE</i>	13 OFFICE SOUGHT (if known) <i>JUSTICE OF THE PEACE</i>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name Address / PO Box; Apt. / Suite #; City; State; Zip Code <input type="checkbox"/> additional pages		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME Billy Hefner 16 ACCOUNT # (Ethics Commission Filer)

17 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

** This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$40 + \$375	\$ 415
	4. TOTAL POLITICAL EXPENDITURES	\$ 415
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Billy Hefner

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Billy Hefner, this the 16th day of December, 2013, to certify which, witness my hand and seal of office.

Jean Perkins
Signature of officer administering oath

JEAN PERKINS
Printed name of officer administering oath

Chief Deputy
Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME BILLY HEFNER		3 ACCOUNT # (Ethics Commission filers)
4 Date 10-15-2013	5 Payee name EAGLE LAKE HEADLIGHT 6 Payee address: City: State: Zip Code EAGLE LAKE, TX 77434	7 Amount (\$) 40.00
8 Purpose of payment (See instructions regarding type of information required.) ANNOUNCEMENT (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 12-7-2013	Payee name COLORADO COUNTY REPUBLICAN PARTY Payee address: City: State: Zip Code 1151 DOUBRE CREEK ROAD CAT SPRING TX 789334	Amount (\$) 375
Purpose of payment (See instructions regarding type of information required.) FILING FEE (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date	Payee name Payee address: City: State: Zip Code	Amount (\$)
Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



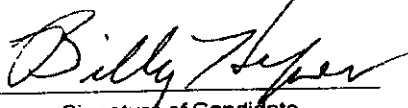






CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA
PG 2

<p>11 CANDIDATE NAME</p>	<p><i>Billy Hefner</i></p>
<p>12 MODIFIED REPORTING DECLARATION</p>	<p>COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.</p> <p>** This declaration must be filed no later than the 30th day before the first election to which the declaration applies. **</p> <p>** The modified reporting option is valid for one election cycle only. ** <small>(An election cycle includes a primary election, a general election, and any related runoffs.)</small></p> <p>** Candidates for the office of state chair of a political party and candidates for county chair of a political party may <u>NOT</u> choose modified reporting. **</p> <p>I do not intend to accept more than \$500 in political contributions or make more than \$500 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.</p> <p style="text-align: center;"> <u>2014</u> <small>Year of election(s) or election cycle to which declaration applies</small> </p> <p style="text-align: right;">  <small>Signature of Candidate</small> </p>

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