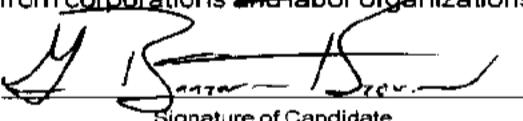


APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA

PG 1

See CTA Instruction Guide for detailed instructions.						1 Total pages filed:				
2 CANDIDATE NAME		MS / MRS / MR	FIRST	MI	B	OFFICE USE ONLY Filer ID # RECEIVED Date Received 2:49 FEB 03 2026 PM CLOCK 10:45 AM ELECTIONS TERRY COUNTY, TEXAS				
		NICKNAME	LAST	SUFFIX						
3 CANDIDATE MAILING		ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE				
4 CANDIDATE PHONE		AREA CODE	PHONE NUMBER	EXTENSION			Receipt #	Amount \$		
5 OFFICE HELD (If any)		SCHOOL Board TRUSTEE							Date Processed	
6 OFFICE SOUGHT (If known)		SCHOOL Board TRUSTEE							Date Imaged	
7 CAMPAIGN TREASURER NAME		MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX			
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)		STREET ADDRESS:		APT / SUITE #:	CITY:		STATE:	ZIP CODE		
9 CAMPAIGN TREASURER PHONE		AREA CODE	PHONE NUMBER	EXTENSION						
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								
02-03-2026 Date Signed										
GO TO PAGE 2										

CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP
COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

Subscription to the Code of Fair Campaign Practices is voluntary.

OFFICE USE ONLY

Date Received

RECEIVED

2:4^a
O'CLOCK

FEB 03 2026

P.M.

DeBancro

Date Hand Delivered or Postmarked
ELECTIONS TERRY COUNTY, TEXAS

Date Processed

Date Imaged

1 ACCOUNT NUMBER
(Ethics Commission Filers)

2 TYPE OF FILER

CANDIDATE

POLITICAL COMMITTEE

*If filing as a candidate, complete boxes 3 - 6.
then read and sign page 2.*

*If filing for a political committee, complete
boxes 7 and 8, then read and sign page 2.*

3 NAME OF CANDIDATE

(PLEASE TYPE OR PRINT)

Barrett Brown

TITLE (Dr., Mr., Ms., etc.)

FIRST

MI

NICKNAME

Ma *Gregory*

LAST

B
SUFFIX (SR., JR., III, etc.)

4 TELEPHONE NUMBER

OF CANDIDATE

AREA CODE

PHONE NUMBER

EXTENSION

[REDACTED]

[REDACTED]

[REDACTED]

5 ADDRESS OF CANDIDATE

(PLEASE TYPE OR PRINT)

STREET / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

REDACTED

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

6 OFFICE SOUGHT
BY CANDIDATE

(PLEASE TYPE OR PRINT)

Wellman - Union ISD

School Board TRUSTEE

7 NAME OF COMMITTEE

(PLEASE TYPE OR PRINT)

8 NAME OF CAMPAIGN
TREASURER

(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.)

FIRST

MI

NICKNAME

LAST

SUFFIX (SR., JR., III, etc.)

GO TO PAGE 2