

# 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 Mrs. FIRST Rae MI L  
NICKNAME LAST Campbell SUFFIX

OFFICE USE ONLY

Filer ID #

Date Received **RECEIVED**  
8:44 FEB 13 2026 a.m.  
O'CLOCK  
79316  
ELECTIONS TERRY COUNTY, TEXAS

3 CANDIDATE MAILING ADDRESS

ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE  
REDACTED [REDACTED] [REDACTED] 79316

4 CANDIDATE PHONE

AREA CODE PHONE NUMBER EXTENSION  
( [REDACTED] [REDACTED] [REDACTED] )

Receipt # Amount \$  
Date Processed  
Date Imaged

5 OFFICE HELD (if any)

None

6 OFFICE SOUGHT (if known)

Tony Memorial Hospital Board Member

7 CAMPAIGN TREASURER NAME

MS/MRS/MR Mrs. FIRST Kasee MI D NICKNAME LAST Martinez SUFFIX

8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)

STREET ADDRESS, APT / SUITE #, CITY, STATE, ZIP CODE  
REDACTED [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

9 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
( [REDACTED] [REDACTED] [REDACTED] )

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.

Rae Campbell Signature of Candidate  
2/12/26 Date Signed

GO TO PAGE 2