

**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 File # RECEIVED Date Received 1:00 JAN 30 2026 P M O'CLOCK 288 ELECTIONS TERRY COUNTY TEXAS <small>Date Hand-delivered or Postmarked</small>	
	NICKNAME	LAST	SUFFIX		
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE: REDACTED
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	REDACTED	REDACTED			
5 OFFICE HELD (if any)	<i>Council Member place 1</i>				
6 OFFICE SOUGHT (if known)	<i>Council Member place 1</i>				
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST
	<i>me</i>	<i>Kevin</i>	<i>C</i>	<i>Griffiths</i>	
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			
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>				
	<i>Lody Griffiths</i>			_____ Signature of Candidate	
				_____ Date Signed	
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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 Filer)	2 Total pages filed:				
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR <i>Mr</i>	FIRST <i>Kevin</i>	MI <i>C</i>	OFFICE USE ONLY				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		NICKNAME <i>REDACTED</i>	LAST <i>Griffiths</i>	SUFFIX	Date Received <i>1:00</i>	RECEIVED <i>JAN 30 2026 P</i>			
		ADDRESS / PO BOX <i>REDACTED</i>	APT / SUITE # <i>REDACTED</i>	CITY <i>REDACTED</i>	STATE <i>REDACTED</i>	ZIP CODE <i>REDACTED</i>			
5 CANDIDATE / OFFICEHOLDER PHONE		AREA CODE <i>REDACTED</i>	PHONE NUMBER <i>REDACTED</i>	EXTENSION		Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME		MS / MRS / MR <i>Mr</i>	FIRST <i>Kevin</i>	MI <i>C</i>	RECEIVED <i>1:00</i>		Receipt # <i>REDACTED</i>	Amount \$ <i>REDACTED</i>	
7 CAMPAIGN TREASURER ADDRESS		NICKNAME <i>REDACTED</i>			LAST <i>REDACTED</i>		Date Processed		
7 CAMPAIGN TREASURER ADDRESS		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE # <i>REDACTED</i>			CITY; <i>REDACTED</i>		STATE; <i>REDACTED</i>	ZIP CODE <i>REDACTED</i>	
8 CAMPAIGN TREASURER PHONE		AREA CODE <i>REDACTED</i>	PHONE NUMBER <i>REDACTED</i>	EXTENSION		RECEIVED <i>1:00</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 Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED		Month <i>REDACTED</i>	Day <i>REDACTED</i>	Year <i>REDACTED</i>	THROUGH		Month <i>1</i>	Day <i>15</i>	Year <i>2026</i>
11 ELECTION		ELECTION DATE Month <i>REDACTED</i>		Day <i>REDACTED</i>	Year <i>REDACTED</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other Description			
12 OFFICE		OFFICE HELD (if any) <i>Council Member place 1</i>			13 OFFICE SOUGHT (if known) <i>Council Member place 1</i>				
14 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.							
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME						
		COMMITTEE ADDRESS							
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRESS							

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