APPOINTMENT OF A CAMPAIGN TREASURER BY A GENERAL-PURPOSE COMMITTEE

FORM GTA PG 1

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See	e GTA Instruction Guide for detailed instructions.	1 Total pages filed:
2 COMMITTEE NAME	Texas Organizing Project Political Action Committee	OFFICE USE ONLY
		Date Received
3 ACRONYM		OCC RECEIVED A NOV 8 '21 AM10:3
4 COMMITTEE ADDRESS	ADDRESS / POBOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 120296	
	San Antonio, TX 7812	Date Hand-delivered or Postmarked
		Receipt# Amount\$
5 REPORTING TYPE	REGULAR MONTHLY	Date Processed Date Imaged
6 CAMPAIGN	MS/MRS/MR FIRST MI NICKNAME	LAST SUFFIX
TREASURER NAME	Steven Halvorson	DSI SUITIA
7 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT/SUITE#: CITY; STATE; 1013 W. Ellaine Ave. Pasadena, TX 78212	ZIP CODE
8 CAMPAIGN TREASURER MAILING ADDRESS Same as above	ADDRESS / POBOX; APT / SUITE #; CITY; STATE; ZIP CODE	
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 894-3521	***
10 PERSON APPOINTING TREASURER	Steven Halvorson	SUFFIX
11 SIGNATURE	I understand that I have been appointed as the campaign treas committee and that I am responsible for filing all required reports fines for failure to do so. I am aware of the restrictions in title 15 of the from corporations and labor organizations.	and that I may be subject to e Election Code on contributions
		Campaign Treasurer
12 ASSISTANT CAMPAIGN TREASURER	FIRST MI LAST	SUFFIX
13 ASSISTANT CAMPAIGN TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
14 ASSISTANT CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION	
	CONTINUE ON PAGE 2 This appointment is effective on the date it is filed with the com	mission.

GENERAL-PURPOSE COMMITTEE:

CONTROLLING ENTITY INFORMATION

FORM GTA PG 2

15	COMMITTEE NAME	Tex	as Organizing Proj	ect Political Acti	on Committee	
16	CONTROLLING ENTITY INFORMATION	FULL NAME OF CONT	ROLLING ENTITY			
	IN ORMATION	ACRONYM				
		FULL NAME OF CONT	ROLLING ENTITY		11.	
		ACRONYM			*************	
		FULL NAME OF CONT	ROLLING ENTITY			
		ACRONYM				
		FULL NAME OF CONT	ROLLING ENTITY			
**********	***************************************	ACRONYM				
	CONTRIBUTION DECISION MAKERS	First Mich	elle Tremillo	Last	Suffix	
		First	MI	Last	Suffix	
		Firsl	MI	Last	Suffix	
		First	М	Last	Suffix	
		First	MI	Lasi	Suffix	
18	EXPENDITURE	First	MI	Last	Suffix	
	DECISION MAKERS	Michelle Tremillo				
		First	MI	Last	Sulfix	
		First	М	Last	Suffix	
		First	MI	Last	Suffix	
		First	MI	Last	Sutfix	
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					AND THE CONTRACT OF THE CONTRA	

FORM GTA **GENERAL-PURPOSE COMMITTEE:** PG 3 RECIPIENT COMMITTEES 19 COMMITTEE Texas Organizing Project Political Action Committee NAME 20 RECIPIENT Committee name GENERAL **Equity PAC PURPOSE** City; COMMITTEES Committee address; State; Zip Code 780 W. FM 1626 Unit 53 Manchaca, TX 78652 Committee name Committee address; State; Zip Code City; Committee name City; Zip Code Committee address; State; Committee name Committee address; City; Zip Code Committee name City; Zip Code State; Committee address; For more information about where to file go to: https://ethics.state.tx.us/filinginfo/QuickFileAReport.php **CONTINUE ON PAGE 4** ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

GENERAL-PURPOSE COMMITTEE:

FORM GTA

STATEMENT AUTHORIZING DIRECT CAMPAIGN EXPENDITURES FROM CORPORATION OR LABOR ORGANIZATION POLITICAL CONTRIBUTIONS UNDER SECTION 252.003, ELECTION CODE

21 COMMITTEE NAME

Texas Organizing Project Political Action Committee

22 AFFIRMATION (if applicable)

I swear, or affirm, under penalty of perjury that the following statement is in all things true and correct:



The political committee named above is not established or controlled by a candidate or an officeholder, and will not use any political contribution from a corporation or a labor organization to make a political contribution to: (1) a candidate for elective office or an officeholder, or (2) a political committee that has not included in its campaign treasurer appointment a Statement Authorizing Direct Campaign Expenditures from Corporation or Labor Organization Political Contributions declaring the same.

PLEASE COMPLETE EITHER OPTION (1) OR (2) BELOW:

mmittee Representative
10 Marie 11
Title of officer administering cath
is
(country)
Representative (Declarant)
K

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