

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

|                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  |                  |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------|
| See CTA Instruction Guide for detailed instructions.        |                                                                                                                                                                                                                                                                                                                                                                                                                             | 1 Total pages filed:<br><b>1</b> |                  |
| 2 CANDIDATE NAME                                            | MS / MRS / MR<br><b>Sheila</b>                                                                                                                                                                                                                                                                                                                                                                                              | FIRST<br><b>P.</b>               | MI               |
|                                                             | NICKNAME<br><b>Taylor</b>                                                                                                                                                                                                                                                                                                                                                                                                   | LAST                             | SUFFIX           |
| 3 CANDIDATE MAILING ADDRESS                                 | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br><b>3213 Northwood Dr<br/>Highland Village, TX 75077</b>                                                                                                                                                                                                                                                                                                           |                                  |                  |
|                                                             | 4 CANDIDATE PHONE<br>AREA CODE PHONE NUMBER EXTENSION<br><b>(214) 288-9176</b>                                                                                                                                                                                                                                                                                                                                              |                                  |                  |
| 5 OFFICE HELD (if any)                                      | <b>LISD School Board Trustee, Place</b>                                                                                                                                                                                                                                                                                                                                                                                     |                                  |                  |
| 6 OFFICE SOUGHT (if known)                                  | <b>LISD School Board Trustee</b>                                                                                                                                                                                                                                                                                                                                                                                            |                                  |                  |
| 7 CAMPAIGN TREASURER NAME                                   | MS/MRS/MR<br><b>Susan</b>                                                                                                                                                                                                                                                                                                                                                                                                   | FIRST<br><b>McGowan</b>          | MI<br><b>CPA</b> |
|                                                             | NICKNAME<br><b>CPA</b>                                                                                                                                                                                                                                                                                                                                                                                                      | LAST                             | SUFFIX           |
| 8 CAMPAIGN TREASURER STREET ADDRESS (residence or business) | STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE<br><b>2300 Fossett Dr<br/>Flower Mound, TX 75028</b>                                                                                                                                                                                                                                                                                                                   |                                  |                  |
|                                                             | 9 CAMPAIGN TREASURER PHONE<br>AREA CODE PHONE NUMBER EXTENSION<br><b>(817) 291-2948</b>                                                                                                                                                                                                                                                                                                                                     |                                  |                  |
| 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><b>[Signature]</b><br/>Signature of Candidate</p> <p><b>11/11/24</b><br/>Date Signed</p> |                                  |                  |

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# CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA  
PG 2

11 CANDIDATE  
NAME

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 \$1,080 in political contributions or  
make more than \$1,080 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.

\_\_\_\_\_  
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](mailto: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:  
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>