

**APPOINTMENT OF A CAMPAIGN TREASURER  
BY A CANDIDATE**

**FORM CTA**

**PG 1**

See CTA Instruction Guide for detailed instructions.						1 Total pages filed:
<b>2 CANDIDATE NAME</b>	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b> Filer ID # <i>RECEIVED</i> <i>3:00 O'CLOCK PM</i> Date Received <i>DEC 5 2025</i> RAINS COUNTY ELECTIONS DEPARTMENT, TEXAS BY: <i>Mrs. Pate</i>		
	NICKNAME	LAST	SUFFIX			
<b>3 CANDIDATE MAILING ADDRESS</b>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	<i>951 Rains County Road 1300 Emory, TX 75440</i>					
<b>4 CANDIDATE PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #	Amount \$	
	<i>(903) 951-8169</i>			Date Processed		
<b>5 OFFICE HELD (if any)</b>	<i>District Clerk</i>					Date Imaged
<b>6 OFFICE SOUGHT (if known)</b>	<i>District Clerk</i>					
<b>7 CAMPAIGN TREASURER NAME</b>	MS/MRS/MR	FIRST	MI	NICKNAME	LAST	SUFFIX
	<i>Mrs. Laura C Pate</i>					
<b>8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)</b>	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	<i>951 Rains County Road 1300 Emory, TX 75440</i>					
<b>9 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION			
	<i>(903) 951 8169</i>					
<b>10 CANDIDATE SIGNATURE</b>	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.					
	<i>Laura Pate</i>			<i>12/5/25</i> Date Signed		
<b>GO TO PAGE 2</b>						

# 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. •**

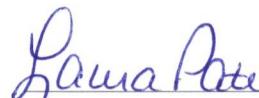
**• The modified reporting option is valid for one election cycle only. •**  
(An election cycle includes a primary election, a general election, and any related runoffs.)

**• Candidates for the office of state chair of a political party  
may NOT choose modified reporting. •**

I do not intend to accept more than \$1,110 in political contributions or make more than \$1,110 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.

2026

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>

# 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 Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <i>Laura</i>	MI <i>C</i>	<b>OFFICE USE ONLY</b>  Date Received <b>RECEIVED</b> AT <u>300</u> O'CLOCK <u>PM</u> <b>DEC 5 2025</b> BY: <i>Moralollar</i> Date Hand-delivered or Date Postmarked			
	NICKNAME	LAST <i>Pate</i>	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE		
	<i>951 Rs County Road 1300 Emory Tx 75440</i>						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	<i>(903) 951 8169</i>						
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Laura</i>	MI <i>C</i>	Receipt # <input type="text"/> Amount \$ <input type="text"/> Date Processed Date Imaged			
	NICKNAME	LAST <i>Pate</i>	SUFFIX				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #:			CITY:	STATE; ZIP CODE		
	<i>951 Rs County Road 1300 Emory Tx 75440</i>						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	<i>(903) 951-8169</i>						
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input checked="" 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>11</i>	Day <i>01</i>	Year <i>2025</i>	Month <i>12</i>	Day <i>05</i>	Year <i>2025</i>	
11 ELECTION	ELECTION DATE Month Day Year <i>/ /</i>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Other Description _____				
12 OFFICE	OFFICE HELD (if any) <i>District Clerk</i>			13 OFFICE SOUGHT (if known) <i>District Clerk</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	COMMITTEE NAME				
		<input type="checkbox"/> GENERAL					
		<input type="checkbox"/> SPECIFIC					
		COMMITTEE ADDRESS					
COMMITTEE CAMPAIGN TREASURER NAME							
COMMITTEE CAMPAIGN TREASURER ADDRESS							

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME	Laura Pate	
16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS		

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Laura Pate

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Laura Pate, and my date of birth is 05/30/1978.  
 My address is 951 RS County Road 1300, Emory, TX, 75440, Texas US  
 (street) (city) (state) (zip code) (country)

Executed in Rains County, State of Texas, on the 5<sup>th</sup> day of December, 2025.

Laura Pate

Signature of Candidate/Officeholder (Declarant)