

CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA

PG 2

11 CANDIDATE
NAME

SID WINN

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

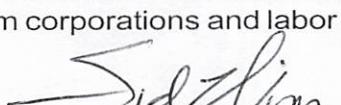
Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

**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		
		SID	W	Filer ID #		
3 CANDIDATE MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
		WINN		RECEIVED		
4 CANDIDATE PHONE	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	DEC 09 2025
	PO Box 1 700 W REIMAN		SEYMOUR TX	76380		Election Administrator Date Hand-delivered or Postmarked
5 OFFICE HELD (if any)	N/A					Receipt #
6 OFFICE SOUGHT (if known)	BAYLOR COUNTY COMMISSIONER 4					Amount \$
7 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	NICKNAME	LAST	SUFFIX
	D			D	WINN	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	Po Box 1 700 W REIMAN		SEYMOUR TX 76380			
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(940)	256 3646				
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>12/8/25</p>		
	Signature of Candidate			Date Signed		
GO TO PAGE 2						