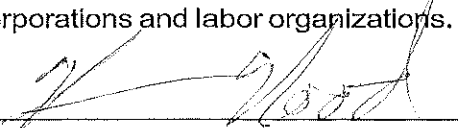


# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.		1 Total pages filed:			
2 CANDIDATE NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	NICKNAME	LAST	SUFFIX	Filer ID #	County & District Clerk Elections County, Texas
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Box 622 Silveston TX 79257 Date Received: <i>12/4/2023</i> FILED Time: 10:22 AM Date Hand-delivered or Postmarked:				
4 CANDIDATE PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #	Amount \$
	(806) 292-8271			Date Processed	Date Imaged
5 OFFICE HELD (if any)	County Commissioner Pat				
6 OFFICE SOUGHT (if known)	County Commissioner Pat				
7 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	NICKNAME	LAST
	Ken Wood				
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	800 Broadway				
9 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(806) 292-8271				
10 CANDIDATE SIGNATURE	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.				
	 Signature of Candidate			12/4/23 Date Signed	

GO TO PAGE 2

**CANDIDATE MODIFIED  
REPORTING DECLARATION**

**FORM CTA  
PG 2**

11 CANDIDATE  
NAME

*Ken Wood*

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. ••**

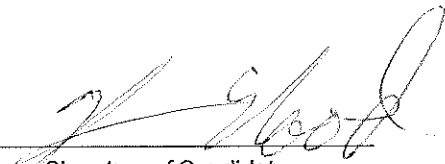
**•• The modified reporting option is valid for one election cycle only. ••**  
(An election cycle includes a primary election, a general election, and any related runoffs.)

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

I do not intend to accept more than \$1,010 in political contributions or  
make more than \$1,010 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.

*2024*

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>

# CODE OF FAIR CAMPAIGN PRACTICES

FORM CFCP  
COVER SHEET

Pursuant to chapter 258 of the Election Code, every candidate and political committee is encouraged to subscribe to the Code of Fair Campaign Practices. The Code may be filed with the proper filing authority upon submission of a campaign treasurer appointment form. Candidates or political committees that already have a current campaign treasurer appointment on file as of September 1, 1997, may subscribe to the code at any time.

*Subscription to the Code of Fair Campaign Practices is voluntary.*

OFFICE USE ONLY

Date Received **FILED**  
Time: 10:26 AM

DEC 04 2023

*[Signature]*  
County & District Clerk Eriscue County, Texas

Date Hand-delivered or Postmarked

Date Processed

Date Imaged

1 ACCOUNT NUMBER  
(Ethics Commission Filers)

2 TYPE OF FILER

CANDIDATE

POLITICAL COMMITTEE

*If filing as a candidate, complete boxes 3 - 6, then read and sign page 2.*

*If filing for a political committee, complete boxes 7 and 8, then read and sign page 2.*

3 NAME OF CANDIDATE  
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.) FIRST MI  
*Kew Wood*  
NICKNAME LAST SUFFIX (SR., JR., III, etc.)

4 TELEPHONE NUMBER OF CANDIDATE  
(PLEASE TYPE OR PRINT)

AREA CODE PHONE NUMBER EXTENSION  
*(806) 292-8221*

5 ADDRESS OF CANDIDATE  
(PLEASE TYPE OR PRINT)

STREET / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
*PO, Box 672 Silerton Texas 79257*

6 OFFICE SOUGHT BY CANDIDATE  
(PLEASE TYPE OR PRINT)

*Co. Commissioner Pet 1*

7 NAME OF COMMITTEE  
(PLEASE TYPE OR PRINT)

8 NAME OF CAMPAIGN TREASURER  
(PLEASE TYPE OR PRINT)

TITLE (Dr., Mr., Ms., etc.) FIRST MI  
NICKNAME LAST SUFFIX (SR., JR., III, etc.)

**GO TO PAGE 2**

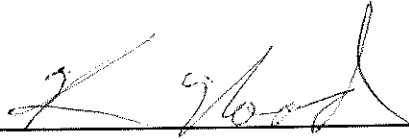
## CODE OF FAIR CAMPAIGN PRACTICES


There are basic principles of decency, honesty, and fair play that every candidate and political committee in this state has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional rights to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.

### THEREFORE:

- (1) I will conduct the campaign openly and publicly and limit attacks on my opponent to legitimate challenges to my opponent's record and stated positions on issues.
- (2) I will not use or permit the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or the candidate's personal or family life.
- (3) I will not use or permit any appeal to negative prejudice based on race, sex, religion, or national origin.
- (4) I will not use campaign material of any sort that misrepresents, distorts, or otherwise falsifies the facts, nor will I use malicious or unfounded accusations that aim at creating or exploiting doubts, without justification, as to the personal integrity or patriotism of my opponent.
- (5) I will not undertake or condone any dishonest or unethical practice that tends to corrupt or undermine our system of free elections or that hampers or prevents the full and free expression of the will of the voters, including any activity aimed at intimidating voters or discouraging them from voting.
- (6) I will defend and uphold the right of every qualified voter to full and equal participation in the electoral process, and will not engage in any activity aimed at intimidating voters or discouraging them from voting.
- (7) I will immediately and publicly repudiate methods and tactics that may come from others that I have pledged not to use or condone. I shall take firm action against any subordinate who violates any provision of this code or the laws governing elections.

I, the undersigned, candidate for election to public office in the State of Texas or campaign treasurer of a political committee, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct the campaign in accordance with the above principles and practices.

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Date

Jan 15

~~2024~~  
2024

# 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      MI  
Ken Wood  
.....  
NICKNAME      LAST      SUFFIX

**OFFICE USE ONLY**

Date Received  
  
**FILED**  
Time: 11:33 AM  
**JAN 09 2024**

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 Change of Address

ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE  
PO Box 622  
Silverton Texas 79257

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE      PHONE NUMBER      EXTENSION  
(806)      292 8221

Date Hand Delivered or Date Postmarked  
County of Dallas, State of Texas

6 CAMPAIGN TREASURER NAME

MS / MRS / MR      FIRST      MI  
Ken Wood  
.....  
NICKNAME      LAST      SUFFIX

Receipt #      Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE  
PO Box 622  
Silverton, Texas 79257

8 CAMPAIGN TREASURER PHONE

AREA CODE      PHONE NUMBER      EXTENSION  
(806)      292 8221

9 REPORT TYPE

January 15       30th day before election       Runoff       15th day after campaign treasurer appointment (Officeholder Only)  
 July 15       8th day before election       Exceeded Modified Reporting Limit       Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month      Day      Year      THROUGH      Month      Day      Year  
12 / 4 / 23      THROUGH      1 / 15 / 24

11 ELECTION

ELECTION DATE      ELECTION TYPE  
Month      Day      Year       Primary       Runoff       Other Description  
3 / 5 / 24       General       Special

12 OFFICE

OFFICE HELD (if any)      OFFICE SOUGHT (if known)  
County Commissioner Dist 1      County Commissioner Dist 1

14 NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

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.

COMMITTEE TYPE      COMMITTEE NAME

GENERAL      COMMITTEE ADDRESS

SPECIFIC      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 Ken Wood 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
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

[Signature]  
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Ken Wood this the 9th day of January

20 24, to certify which, witness my hand and seal of office.

[Signature] Amy Fuster Briscoe County Clerk  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

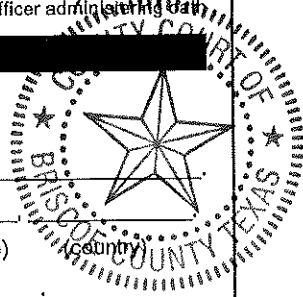
(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) \_\_\_\_\_ (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$