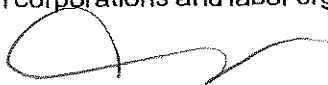


# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

|                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |           |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------|
| See CTA Instruction Guide for detailed instructions.                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1 Total pages filed:<br>1                   |           |
| 2 CANDIDATE NAME                                                                                        | MS/MRS/MR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | FIRST                                       | MI        |
|                                                                                                         | NICKNAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | LAST                                        | SUFFIX    |
| Mrs. Carli A Koehne                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | OFFICE USE ONLY                             |           |
| 3 CANDIDATE MAILING ADDRESS                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Filer ID #                                  |           |
| ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>4807 Old Chappell Hill Rd<br>Brenham TX 77833 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date Received<br>RECEIVED SEP 04 2025       |           |
| 4 CANDIDATE PHONE                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date Hand-delivered or Postmarked<br>9/4/25 |           |
| AREA CODE PHONE NUMBER EXTENSION<br>(979) 551 - 0919                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Receipt #                                   | Amount \$ |
| 5 OFFICE HELD (if any)                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date Processed                              |           |
| 6 OFFICE SOUGHT (if known)                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date Imaged<br>9/8/2025                     |           |
| District Clerk                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                             |           |
| 7 CAMPAIGN TREASURER NAME                                                                               | MS/MRS/MR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | FIRST                                       | MI        |
| Mr. Jeffrey S Koehne                                                                                    | NICKNAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | LAST                                        | SUFFIX    |
| 8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)                                             | STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE<br>4807 Old Chappell Hill Rd<br>Bren TX 77833                                                                                                                                                                                                                                                                                                                                                                                           |                                             |           |
| 9 CAMPAIGN TREASURER PHONE                                                                              | AREA CODE PHONE NUMBER EXTENSION<br>(979) 251-4770                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                             |           |
| 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><br/>Signature of Candidate</p> <p><u>9/4/2025</u><br/>Date Signed</p> |                                             |           |

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