# CODE OF FAIR CAMPAIGN PRACTICES

# FORM CFCP COVER SHEET

	OFFICE USE ONLY			
Pursuant to chapter 258 of a political committee is encoronated authority upon submission form. Candidates or policurrent campaign treasurer 1997, may subscribe to the Subscription to the Code of	r S t			
1 ACCOUNT NUMBER	2 TYPE OF FILER	s.		
(Ethics Commission Filers)	CANDIDATE 🗸	POLITICAL COMMITTEE		
		If filing for a political committee, complete		
	then read and sign page 2.	boxes 7 and 8, then read and sign page 2.		
3 NAME OF CANDIDATE	TITLE (Dr., Mr., Ms., etc.) FIRST	MI		
(PLEASE TYPE OR PRINT)	H. Brock Hudson			
	NICKNAME LAST	SUFFIX (SR., JR., III, etc.)		
4 TELEPHONE NUMBER OF CANDIDATE	AREA CODE PHONE NUMBER	EXTENSION		
(PLEASE TYPE OR PRINT)	(281) 630-9792			
5 ADDRESS OF CANDIDATE	STREET / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE		
(PLEASE TYPE OR PRINT)	4031 Sul Ross Houston	Tx 77027		
6 OFFICE SOUGHT	100000	12 1100		
BY CANDIDATE (PLEASE TYPE OR PRINT)	Director			
7 NAME OF COMMITTEE				
(PLEASE TYPE OR PRINT)	H(A			
	P(A			
8 NAME OF CAMPAIGN TREASURER	TITLE (Dr., Mr., Ms., etc.) FIRST	MI		
(PLEASE TYPE OR PRINT)	Self NICKNAME LAST	SUFFIX (SR., JR., III, etc.)		
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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 untrammeled 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.

MRide Ms	7122124		
Signature	Date		

### APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

## FORM CTA

See CTA Instruction Guide for detailed instructions.					1 Total pages file	1 Total pages filed:			
	CANDIDATE	MS / MRS / MR	FIRST		MI	OFFICE	OFFICE USE ONLY		
,	NAME	Brock	Hidson			Filer ID #			
		NICKNAME	LAST		SUFFIX	Date Received			
	CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX;	APT/SUITE#;	CITY;	STATE; ZIP CODI	E			
			×			Date Hand-delivered o	or Postmarked		
-	CANDIDATE PHONE	AREA CODE	PHONE NUMBER		EXTENSION	Receipt#	Amount \$		
		(281)	4309792	-		Date Processed			
1	OFFICE HELD (if any)	0.00	eder		r	Date Imaged			
_	OFFICE SOUGHT (if known)	Dire	ctor						
•	CAMPAIGN TREASURER NAME	ms/mrs/mr 5 af	FIRST	MI	NICKNAME	LAST	SUFFIX		
	CAMPAIGN TREASURER STREET ADDRESS	STREET ADDRESS;	#	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
(re	esidence or business)								
	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION				
	FIIONE	( )							
	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.							
		BF	welch -	adidata		7/22/2			
			Signature of Car	TO PAGE		Date Signe	·····		

I1 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.			
	M. IN			
	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 <a href="mailto:treasappoint@ethics.state.tx.us">treasappoint@ethics.state.tx.us</a>
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