

| AMENDMENT: APPOINTMENT OF A<br>CAMPAIGN TREASURER BY A CANDIDATE                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                        | FORM ACTA<br>PG 1                                                                                                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1 CANDIDATE<br>NAME<br><br>Melissa Ait Belaid                                                                                                                     | 2 FILER ID #<br><br>00082671                                                                                                                                                                                                                                                                                                                                                                           | 3 Total pages filed:                                                                                                                          |  |
| See ACTA Instruction Guide for detailed instructions.<br>Use this form for changes to existing information only. Do not provide information previously disclosed. |                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                               |  |
| 4 CANDIDATE<br>NAME                                                                                                                                               | NEW MS / MRS / MR FIRST MI<br><br>NICKNAME LAST SUFFIX                                                                                                                                                                                                                                                                                                                                                 | OFFICE USE ONLY<br>Date Received<br><br>Date Hand-delivered or Postmarked<br><br>Receipt # Amount \$<br><br>Date Processed<br><br>Date Imaged |  |
| 5 CANDIDATE<br>MAILING<br>ADDRESS                                                                                                                                 | NEW ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                               |  |
| 6 CANDIDATE<br>PHONE                                                                                                                                              | NEW AREA CODE PHONE NUMBER EXTENSION<br><br>( )                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                               |  |
| 7 OFFICE HELD<br>(if any)                                                                                                                                         | NEW                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                               |  |
| 8 OFFICE<br>SOUGHT<br>(if known)                                                                                                                                  | NEW                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                               |  |
| 9 CAMPAIGN<br>TREASURER<br>NAME                                                                                                                                   | NEW MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX<br><br>Mr. Zakariae Ait Belaid                                                                                                                                                                                                                                                                                                                         |                                                                                                                                               |  |
| 10 CAMPAIGN<br>TREASURER<br>STREET<br>ADDRESS<br>(residence or business)                                                                                          | NEW STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE<br><br>Princeton, TX 75407                                                                                                                                                                                                                                                                                                                    |                                                                                                                                               |  |
| 11 CAMPAIGN<br>TREASURER<br>PHONE                                                                                                                                 | NEW AREA CODE PHONE NUMBER EXTENSION<br><br>                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                               |  |
| 12 CANDIDATE<br>SIGNATURE                                                                                                                                         | I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.<br><br>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.<br><br>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.<br><br><u>Melissa Ait Belaid</u> 8/1/23<br>Signature of Candidate Date Signed |                                                                                                                                               |  |
| GO TO PAGE 2                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                               |  |

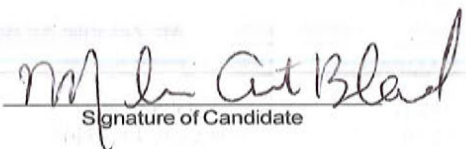
**AMENDMENT:**  
**CANDIDATE MODIFIED REPORTING DECLARATION****FORM ACTA**  
**PG 2****13 CANDIDATE  
NAME**

Melissa Ait Belaid

**14 MODIFIED  
REPORTING  
DECLARATION****NEW****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.

2023

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>