

REQUEST FOR ELECTRONIC FILING PASSWORD

FORM PASS

Please print or type everything other than your signature. See back for additional explanation about completing this document.		1	FILER ACCOUNT #
2	NAME OF CANDIDATE / TREASURER OF COMMITTEE	OFFICE USE ONLY Date Received	
3	NAME OF INDIVIDUAL REQUESTING PASSWORD		
4	ADDRESS OF INDIVIDUAL REQUESTING PASSWORD	ADDRESS (No PO Box, please) APT / SUITE # CITY STATE ZIP CODE Date Hand-delivered or Postmarked	
5	TELEPHONE NUMBER Work Other	AREA CODE PHONE NUMBER EXTENSION () ()	PASSWORD
6	EMAIL ADDRESS		
7	OFFICE HELD (If applicable)		
8	OFFICE SOUGHT (If applicable)		
9	FILER SECRET QUESTION		
10	ANSWER TO FILER QUESTION		
11	FILER SIGNATURE	<p>I swear that I am the person required by Title 15, Election Code, to file campaign finance reports with the Office of the City Clerk, the local filing authority for the Texas Ethics Commission. This document is my official password request for the purpose of filing electronic campaign finance reports with the Texas Ethics Commission.</p> <p style="text-align: center;">_____ Signature of Filer Requesting Password</p> <p style="text-align: center;">_____ Signature of Candidate</p>	