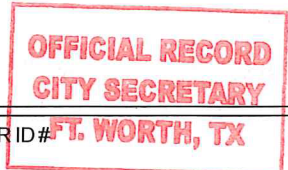


**AMENDMENT: APPOINTMENT OF A  
CAMPAIGN TREASURER BY A CANDIDATE**



1 CANDIDATE NAME <b>CARLOS E. FLORES</b>	2 FILER ID# <b>FT. WORTH, TX</b>	3 Total pages filed: <b>1</b>
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See ACTA Instruction Guide for detailed instructions.  
Use this form for changes to existing information only. Do not provide information previously disclosed.

4 CANDIDATE NAME	<input checked="" type="checkbox"/> NEW MS / MRS / MR <b>MR</b> FIRST <b>CARLOS</b> MI <b>E.</b> NICKNAME LAST SUFFIX <b>FLORES</b>	<b>OFFICE USE ONLY</b> Date Received <b>RECEIVED JAN 15 2021 CITY OF FORT WORTH CITY SECRETARY</b> Date Hand-delivered or Postmarked Receipt # Amount \$ Date Processed Date Imaged
5 CANDIDATE MAILING ADDRESS	<input checked="" type="checkbox"/> NEW ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE [REDACTED]	
6 CANDIDATE PHONE	<input checked="" type="checkbox"/> NEW AREA CODE PHONE NUMBER EXTENSION <b>(682) 233-1350</b>	

7 OFFICE HELD (if any)	<input checked="" type="checkbox"/> NEW <b>CITY COUNCIL DISTRICT 2</b>
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8 OFFICE SOUGHT (if known)	<input checked="" type="checkbox"/> NEW <b>CITY COUNCIL DISTRICT 2</b>
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9 CAMPAIGN TREASURER NAME	<input checked="" type="checkbox"/> NEW MS / MRS / MR <b>MR</b> FIRST <b>ANDREA</b> MI NICKNAME <b>ESPINOZA</b> LAST SUFFIX
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10 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	<input checked="" type="checkbox"/> NEW STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>2720 NW 25TH STREET TX 76106</b>
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11 CAMPAIGN TREASURER PHONE	<input checked="" type="checkbox"/> NEW AREA CODE PHONE NUMBER EXTENSION <b>(817) 658-6978</b>
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12 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><b>Carlos E. Flores</b>          _____          Signature of Candidate</p> <p><b>01/15/2021</b>          _____          Date Signed</p>
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**GO TO PAGE 2**