## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT FORM C/OH **COVER SHEET PG 1** The C/OH instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: 3 CANDIDATE/ MS// MRS / MR OFFICEHOLDER МІ OFFICE USE ONLY NAME NICKNAME Date Received SUFFIX CANDIDATE/ ADDRESS / PO BOX: APT / SUITE # OFFICEHOLDER STATE; ZIP CODE MAILING PO 10x2049 **ADDRESS** Change of Address 5 CANDIDATE/ OFFICEHOLDER EXTENSION Date Hand-delivered or Date Postmarked PHONE 6 CAMPAIGN MS / MRS / MR FIRST Receipt # Amount \$ TREASURER MI NAME Date Processed NICKNAME LAST SUFFIX Date Imaged 7 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY; TREASURER STATE: ZIP CODE **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER TREASURER **EXTENSION** PHONE 213-0682 9 REPORT TYPE January 15 30th day before election Runoff 🖭 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded Modified Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Dav COVERED Month Day THROUGH 11 ELECTION ELECTION DATE ELECTION TYPE Primary Month Runoff Description General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) Oursoner SAM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS GO TO PAGE 2

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME			
- CONTRAINE			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		N \$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		, \$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$
	4. TOTAL POLITICAL EXPEN	DITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBL OF REPORTING PERIOD	ITIONS MAINTAINED AS OF THE LAS	ST DAY \$
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT (     LAST DAY OF THE REPORTING	OF ALL OUTSTANDING LOANS AS OF	THE \$
requ	vear, or affirm, under penalty of perjury, uired to be reported by me under Title 15, I	Election Code.	and colfrect and includes all informati
	Please comp	lete either option below:	:
(1) Affidavit	ITZEL GOMEZ  Notary Public, State of Te  Comm. Expires 07-06-20  Notary ID 132552192	024	
Swom to and subscribed be	fore me by Solve H.	C(1)20	21
00	ich, witness my hand and seal of office.	Clube this the	day of January.
ignature of officer administering		ne 7 er administering oath	Notary Public
			Title of officer administering oath
2) Unsworn Declaration		OR	
ly name is	ė.	and my data of high is	
y address is		, and my date of birth is	·
	(street)	(city) (stat	to) /rin code) / i i i
xecuted in	County, State of	on the day of(month)	te) (zip code) (country), 20 (year)
		Signature of Candidate	e/Officeholder (Declarant)