

# 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:												
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;"><input checked="" type="checkbox"/> MS / MRS / MR</td> <td style="width:35%;">FIRST <i>Rosa</i></td> <td style="width:15%;">MI <i>m</i></td> </tr> <tr> <td>NICKNAME</td> <td>LAST <i>mancha</i></td> <td>SUFFIX</td> </tr> </table>	<input checked="" type="checkbox"/> MS / MRS / MR	FIRST <i>Rosa</i>	MI <i>m</i>	NICKNAME	LAST <i>mancha</i>	SUFFIX	<b>OFFICE USE ONLY</b>							
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<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">ADDRESS / PO BOX; <i>607 N.W. 9th Street</i></td> <td style="width:10%;">APT / SUITE #;</td> <td style="width:15%;">CITY; <i>Big Spring TX</i></td> <td style="width:10%;">STATE;</td> <td style="width:35%;">ZIP CODE <i>79720</i></td> </tr> </table>	ADDRESS / PO BOX; <i>607 N.W. 9th Street</i>	APT / SUITE #;	CITY; <i>Big Spring TX</i>	STATE;	ZIP CODE <i>79720</i>	Date Received <i>FEB 04 2022</i> <i>[Signature]</i>								
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<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT</b> (if known)													
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b> <input type="checkbox"/> Additional Pages	<p style="font-size: small;">THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; border-right: 1px solid black;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td style="border-right: 1px solid black;"><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td style="border-right: 1px solid black;"><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="border-right: 1px solid black;"></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS				
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**GO TO PAGE 2**

