

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FILED 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: 2022 OCT 12 AM 9:18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS <input checked="" type="radio"/> MR FIRST: MICHAEL MI: A NICKNAME: LAST: OROZCO SUFFIX: _____ BY: _____	JOHN E. WARREN COUNTY CLERK DALLAS COUNTY OFFICE USE ONLY Date Received: DEPUTY OCT 11 '22 PM 12:24 Date Hand-delivered or Date Postmarked: _____ Receipt #: OCT 11 '22 PM 12:24 Date Processed: _____ Date Imaged: _____
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 5707 VANDERBIET AV DALLAS, TX 75206	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (214) 236-0463	
6 CAMPAIGN TREASURER NAME	MS / MRS <input checked="" type="radio"/> MR FIRST: MICHAEL MI: _____ NICKNAME: LAST: MUNTOYA SUFFIX: _____	
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1708 UPSTAKE DR PLANO, TX 75075	
8 CAMPAIGN TREASURER PHONE	AREA CODE: PHONE NUMBER: EXTENSION: (214) 404-2280	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07 / 01 / 2022 THROUGH 09 / 29 / 2022	
11 ELECTION	ELECTION DATE: Month Day Year 11 / 08 / 2022	ELECTION TYPE: <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any): CONSTABLE PCT 5	13 OFFICE SOUGHT (if known):
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE: COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>MICHAEL OROZCO</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>3825.⁰⁰</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>OCT 11 '22 PM 12:24</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>4200 4361.95</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>46,500</u>

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Michael Orozco this the 11th day of October, 2022, to certify which, witness my hand and seal of office.
[Signature] Mayra Cisneros Notary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____
 My address is _____
 _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)
 Executed in _____ County, State of _____, on the _____ day of _____, 20____
 _____ (month) _____ (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

MICHAEL OROZCO

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3825. ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-18-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TODD HILL	7 Amount of contribution (\$) 100.⁰⁰
6 Contributor address; City; State; Zip Code #3013 604 FT. WORTH AV DALLAS TX 75232		
8 Principal occupation / Job title (See Instructions) GENERAL MANAGER		9 Employer (See Instructions) NUDDLE
Date 8-22-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALISA KEARNEY	Amount of contribution (\$) 250.⁰⁰
Contributor address; City; State; Zip Code 1208 CHEYENNE DR AUBREY, TX 76207		
Principal occupation / Job title (See Instructions) GENERAL MANAGER		Employer (See Instructions) FRISCO HALL EVENT CENTER
Date 8-22-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEVIN NICHOLSON	Amount of contribution (\$) 25.⁰⁰
Contributor address; City; State; Zip Code 10039 PENSIVE DR. DALLAS TX 75229		
Principal occupation / Job title (See Instructions) BARTENDER		Employer (See Instructions) THE GRAPEVINE BAR
Date 8-25-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUAN AYALA	Amount of contribution (\$) 100.⁰⁰
Contributor address; City; State; Zip Code 9668 ARBORHILL DALLAS TX 75243		
Principal occupation / Job title (See Instructions) ADMINISTRATION		Employer (See Instructions) FEMA
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7
2 FILER NAME MICHAEL UROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-25-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDUARDO SALAZAR	7 Amount of contribution (\$) 200.⁰⁰
6 Contributor address; City; State; Zip Code 702 E JEFFERSON BLVD DALLAS TX 75203		
8 Principal occupation / Job title (See Instructions) CHIEF DEPUTY		9 Employer (See Instructions) DALLAS COUNTY
Date 8-25-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SID DAVIS	Amount of contribution (\$) 50.⁰⁰
Contributor address; # A City; State; Zip Code 5717 Mc COMMAS BLVD DALLAS TX 75206		
Principal occupation / Job title (See Instructions) MANAGER SPRINGS		Employer (See Instructions) STANS BLUE NOTE
Date 8-29-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOM JACOB	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 6339 KENWOOD LN DALLAS TX 75214		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICK KRAUSE	Amount of contribution (\$) 50.⁰⁰
Contributor address; City; State; Zip Code 212 W. SPRING VALLEY RD RICHMOND, TX DALLAS 75081		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-30-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MARINA CASTRO	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 4904 TRINITY CROSS CT. DALLAS TX 75236		
8 Principal occupation / Job title (See Instructions) STUDENT		9 Employer (See Instructions)
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ELISSA WEU	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1919 JACKSON ST #1519 DALLAS TX 75201		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TYLER WEAR	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 5955 LEWIS ST DALLAS TX 75206		
Principal occupation / Job title (See Instructions) MANAGING DIRECTOR		Employer (See Instructions) WEATHER BATTLE
Date 8-30-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ANTUINE ROBINSON	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 1345 HARVEST HILL LN LANCASTER, TX 75146		
Principal occupation / Job title (See Instructions) POLICE		Employer (See Instructions) BALCH SPRINGS MARSHAL
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-30-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) TERRY JOHNSON	7 Amount of contribution (\$) 100.⁰⁰
6 Contributor address; City; State; Zip Code 5400 LIVE OAK #228 DALLAS TX 75206		
8 Principal occupation / Job title (See Instructions) BARPENDER		9 Employer (See Instructions) AVENUE SPORTS BAR + GRILL
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ALISA RICHMAN	Amount of contribution (\$) 100.⁰⁰
Contributor address; City; State; Zip Code 4208 DELMAR DALLAS TX 75206		
Principal occupation / Job title (See Instructions) LAWYER		Employer (See Instructions) SELF-EMPLOYED
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MANUEL PEREZ	Amount of contribution (\$) 250.⁰⁰
Contributor address; City; State; Zip Code P.O. BOX 454 SEAGOVILLE, TX 75159		
Principal occupation / Job title (See Instructions) CONSULTANT		Employer (See Instructions) SELF-EMPLOYED
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SUAN JASSO	Amount of contribution (\$) 100.⁰⁰
Contributor address; City; State; Zip Code 702 E. JEFFERSON BLVD DALLAS TX 75203		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) DALLAS COUNTY
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-30-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MARC RICHMAN	7 Amount of contribution (\$) 250.⁰⁰
6 Contributor address; City; State; Zip Code 304 S. RECORD ST STE-200 DAWN TX 75202		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF-EMPLOYED
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) PAULINE MEDRANO	Amount of contribution (\$) 50.⁰⁰
Contributor address; City; State; Zip Code 2346 DOUGLAS DAWN TX 75219		
Principal occupation / Job title (See Instructions) TREASURER		Employer (See Instructions) DAWNS COURT
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) RICHARD OROZCO SR.	Amount of contribution (\$) 1000.⁰⁰
Contributor address; City; State; Zip Code 5707 VANDERBILT AV DAWNS TX 75206		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 8-30-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) SYLVIA LAGOS	Amount of contribution (\$) 250.⁰⁰
Contributor address; City; State; Zip Code 131 N. MONTCLAIR AV DAWNS TX 75208		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date 8-31-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) CHAD WEST	7 Amount of contribution (\$) 250.⁰⁰
6 Contributor address; City; State; Zip Code 3606 S. TYLER ST DALLAS TX 75224		
8 Principal occupation / Job title (See Instructions) LAWYER		9 Employer (See Instructions) SELF - EMPLOYED
Date 8-31-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MIKE JONES	Amount of contribution (\$) 50.⁰⁰
Contributor address; City; State; Zip Code 106 W CHURCH ST GRAND PRAIRIE 75050		
Principal occupation / Job title (See Instructions) JUDGE		Employer (See Instructions) DALLAS COUNTY
Date 9-1-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MICHAEL Lo Vuolo	Amount of contribution (\$) 50.⁰⁰
Contributor address; City; State; Zip Code 5219 MAPLE AV #3211 DALLAS TX 75235		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 9-2-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BILLY GIPSON	Amount of contribution (\$) 150.⁰⁰
Contributor address; City; State; Zip Code 140 N. GARLAND AVE GARLAND TX 75040		
Principal occupation / Job title (See Instructions) CONSTABLE		Employer (See Instructions) DALLAS COUNTY
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2 FILER NAME <u>MICHAEL OROZIO</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>9-2-2022</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>DANA SHEHEE</u>	7 Amount of contribution (\$) <u>100.⁰⁰</u>
6 Contributor address; City; State; Zip Code <u>1104 MARUSA LN DE SOTO, TX 75115</u>		
8 Principal occupation / Job title (See Instructions) <u>POLICE OFFICER</u>		9 Employer (See Instructions) <u>DALLAS COUNTY COLLEGE DISTRICT</u>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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