

FILED

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CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

JOHN F. WARREN COUNTY CLERK DALLAS COUNTY FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 2 Total pages filed BY 1 DEPUTY OFFICE USE ONLY 3 CANDIDATE / OFFICEHOLDER NAME Mrs. Margaret Jones-Johnson MS / MRS / MR FIRST M LAST MI R NICKNAME LAST SUFFIX 4 ORIGINAL REPORT TYPE [X] July 15 [] Runoff [] Final report [] 30th day before election [] Exceeded modified reporting limit [] 8th day before election [] 15th day after treasurer appointment (officeholder only) Other (specify) 5 ORIGINAL PERIOD COVERED Month Day Year Month Day Year 01 / 01 2022 THROUGH 06 30 2022

6 EXPLANATION OF CORRECTION Schedule A(J)1 Omitted 1/11/22 \$50.00 of Atty. Brian Hill, 320 Decker, Ste. 100, Irving, TX 75062; Schedule F1 6/29/22 Paypal is corrected to \$89.98; Cover sheet PG3 A(J)1 corrected to \$2,550 & F1 corrected to \$89.98, PG2 line 2 corrected to \$2,550, line 4 corrected to \$1,372.98

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

- Check ONLY if applicable: [X] Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. [] Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Signature of Candidate/Officeholder



(1) Affidavit

Please complete either option below:

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Margaret Jones-Johnson this the 13 day of January

20 23 to certify which, witness my hand and seal of office. Elizabeth Lariz-Roberson Elizabeth Lariz-Roberson Notary Public

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)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

