## CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed The C/OH Instruction Guide explains how to complete this form. OFFICE USE ONLY 3 CANDIDATE / MS / MRS / MR **OFFICEHOLDER** NAME Date Received NICKNAME LAST SUFFIX П CANDIDATE / ADDRESS / PO BOX: APT / SUITE #; CITY STATE: ZIP CODE 9 OFFICEHOLDER MAILING **ADDRESS** Change of Address CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE Receipt # Amount \$ 6 CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Date Processed NAME NICKNAME SUFFIX LAST Date Imaged APT / SUITE # (NO PO BOX PLEASE); STATE; ZIP CODE CAMPAIGN **TREASURER ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Day Month Year COVERED THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Primary Runoff Other Month Day Year Description General Special 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE 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 16 Filer ID (Ethics Commission Filers)			ler ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRI PLEDGES, LOANS, OR GUARANTEES OF CONTRIBUTIONS MADE ELECTRONICAL	LOANS, OR	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GL	JARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPEND	ITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES		\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAIN OF REPORTING PERIOD	NTAINED AS OF THE LAST DAY	\$373593
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUT- LAST DAY OF THE REPORTING PERIOD	STANDING LOANS AS OF THE	\$
required to be reported by me under Title 15, Election Code.  Signature of Candidate or Officeholder			
Please complete either option below:			
JULIA VASQUEZ  Notary ID # 133106486  My Commission Expires  05-18-2025  JULIA VASQUEZ  Notary ID # 133106486  My Commission Expires  05-18-2025			ID # 133106486 mmission Expires
NOTARY STAMP/SEAL			
Sworn to and subscribed before me by ANN CVU2 this the 2nd day of Tanuary,  to certify which, witness my hand and seal of office.			
20_35, to certify which, witness my hand and seal of office.  Notary  Notary			
Signature of officer administering oath  Printed name of officer administering oath  Title of officer administering oath			
(2) Unsworn Declaration			
(2) Onsworn 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		
Signature of Candidate/Officeholder (Declarant)			