## 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 / OFFICEHOLDER NAME	MS / MRS / MR FIRST	I MI	OFFICE USE ONLY
	NICKNAME LAST JASSO	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #, C	2022 OCT  2022 OCT  2010  CO  DAL  BY	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (2/4) 679 - 4981	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST AN TONIO  NICKNAME LAST  O   VERA	MI SUFFIX	Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE). APT / SL	DITE #, CITY: A//45, Tx. 75208	STATE, ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  (214) 946-0700		
9 REPORT TYPE	January 15 30th day before electrical July 15 8th day before electrical strains and strains are strained as a second strain strain strains.		15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7 / 1 / 22	Month THROUGH	Day Year / 9 / 22
11 ELECTION	Month Day Year Primary  Month 8 / 22  General	Runoff Other Description Special	
12 OFFICE	OFFICE HELD (If any) for the Porce	13 OFFICE SOUGHT (ij/known)  TUSTICE OF ME	PEACE
14 NOTICE FROM POLITICAL COMMITTEE(S)  Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS A THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIR  COMMITTEE TYPE COMMITTEE NAME  GENERAL COMMITTEE ADDRESS	MAY HAVE REEN MADE WITHOUT THE CANDI	DATE'S OR OFFICEUOI DEDIC VAIOUI FROE OR
	COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS		
	GO TO I	PAGE 2	

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

5 C/OH NAME	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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ /66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	HE \$
	Signature of Cand	lidate or Officeholder
	Please complete either option below:	
(1) Affidavit		
NOTARY STAMP/SEA	AL .	
	this the	, day of,
	201010 1110 127	, uay or,
20, to certif	y which, witness my hand and seal of office.	
Signature of officer adminis	tering oath Printed name of officer administering oath	Title of officer administering oath
Signature of officer adminis		
	OR	
(2) Unsworn Declara	tion	/ /
-,	JASSO, and my date of birth is _	6/24/57
My name is	1 HAINES	Tx. 75268 U.S.A
My address is	,,	ate) (zip code) (country)
D.	(street) (city) (st //25 County, State of //2x , on the //2 day of //2x	
Executed in	County, State of, on the day of (month)	(year)
	Signature of Candida	ave/Officeholder (Declarant)