CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to co	omplete this form.	1 Filer ID (Ethics Commiss	sion Filers) 2 To	tal pages filed	d:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	Sem N	MI		OFFICE	JSE ONLY
NAME	NICKNAME	Ja580	SUF	Date R	eived PCS PCS	2022 NOA
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	P.O.		CITY, STATE, ZIP De //ss, /k-/	75208	UNTY CLERK	V-3 PM 12
5 CANDIDATE/ OFFICEHOLDER PHONE	(214) 67	PHONE NUMBER 19 - 4981	EXTENSION		≺	or Dets Postmarked Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	AN TOWIO	MI		rocessed	Amount \$
	NICKNAME	DIVERA	SUF	PFIX Date In	naged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		PO BOX PLEASE); APT / SI	1/42, 1/2- 75'20 8	í	STATE,	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE F	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15	30th day before e		Will activity to the control of the	15th day afte treasurer app (Officeholder Final Report	pointment
10 PERIOD COVERED	Month / O /	Day Year 10 / 22	THROUGH	Month Day		
11 ELECTION	Month Day 11 / 8 / 2	Year Primary General	Runoff Ot	TION TYPE ther escription		
12 OFFICE	JUSTICE OF A	& PEACE	13 OFFICE SOUGH	TA (if known)	ct	
14 NOTICE FROM POLITICAL COMMITTEE(S)	CONSENT. CANDIDATES AND	DER. THESE EXPENDITURES	ACCEPTED OR POLITICAL EXPENI S MAY HAVE BEEN MADE WITHOU RED TO REPORT THIS INFORMATIO	T THE CANDIDATES O	D OFFICEHOLD	EDIO MINORI EDOE OF
Additional Pages	GENERAL COI	MMITTEE ADDRESS				
	SPECIFIC	MMITTEE CAMPAIGN TREA				
	co	MMITTEE CAMPAIGN TRE	EASURER ADDRESS			
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	16 File	r 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 DAY OF REPORTING PERIOD	\$ 166
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$
	quired to be reported by me under Title 15, Election Code.	
	Signature of Candidate	or Officeholder
	Please complete either option below:	
(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed	before me by this the	_ day of,
20, to certify	which, witness my hand and seal of office.	
Signature of officer administer	ring outh	
organization of officer administer	The state of emoci duminotering bath	Title of officer administering oath
(2) Unsworn Declaration	OR OR	
/	1 his	1.1
My name is	, and my date of birth is	24/1959
My address is82	Hrines Dullas Tx.	1520'8 U-S.A.
Executed in	(street) (city) (state) County, State of /Fx45 , on the // day of // day of	(zip code) (country)
	(month)	(year)
	Signature of Candidate/Offic	eholder (Declarant)
		· W