CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

					A STATE OF THE STA	
The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Eth	nics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS (MR) NICKNAME	Richard		SUFFIX	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address				TE; ZIP CODE	2025 NO 500 500 500 500 500	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (214)	354 - 9295		ENSION .	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME Rick	Richard LAST		MI SUFFIX	Date Imaged Amount S	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	NO PO BOX PLEASE); APT/S N. BARNET		DA 11 A5	STATE; ZIP CODE 7 ★ 75211	
8 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER		ENSION		
9 REPORT TYPE	January 15 July 15	30th day before e	lection	Runoff Exceeded Modified Reporting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day Year	THROUGH	Month	Day Year	
11 ELECTION	ELECTION DA Month Day	Year Primary 26 General	Runoff	Other Description	Mey	
12 OFFICE	OFFICE HELD (If any)	Pct. 5 PL: of the Pc	2 13 OFF	ICE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MA	ADE WITHOUT THE CAND	NDE BY POLITICAL COMMITTEES TO SUPPORT IDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR NEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
Additional Pages	GENERAL	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TRE	ASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRES	es .		
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

CAMPAIGN	FINANCE REPORT	COVER SHEET PG 2
15 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	TDAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
	Please complete either option below:	didate or Officeholder
(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed	before me by this the _	day of,
20, to certify v	which, witness my hand and seal of office.	
Signature of officer administer	ing oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration	on .	3.2
My name is Richa	LOZANO, and my date of birth is	7/23/1954
My address is 614.	N. BARNett Ave & Dollas To	Z , 75211, USA .
Executed in Dallas	County, State of 12x45, on the 17 day of Novo (month)	ate) (zip code) (country) here 20 25 (year) ate/Officeholder (Declarant)