# 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 /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY			
OFFICEHOLDER NAME	Hon.	Sasha	M				
IVANIE	NICKNAME	LAST	SUFFIX	Date Received			
		Moreno					
4 CANDIDATE /	ADDRESS / PO BOX		CITY; STATE; ZIP CODE	B, 2			
OFFICEHOLDER MAILING	2000 Talan	2023					
ADDRESS	1	ort Blvd. #142851		ACC L			
Change of Address	Irving, TX	/3014					
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-defivered or De Postmarked			
OFFICEHOLDER	( 469 )	580-5327	003				
PHONE	, ,		Receipt# Amount \$				
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	B 428 = 0			
TREASURER NAME	Mrs.	Maria	G	Date Processed 2			
	NICKNAME	LAST	SUFFIX	Date Imaged			
		Vega					
7 CAMPAIGN	CONTRACTOR NO CONTRACTOR CONTRACT	(NO PO BOX PLEASE); APT / S	UITE #; CITY;	STATE; ZIP CODE			
TREASURER ADDRESS	1211 N. Tyler Street						
(Residence or Business)	Dallas, TX 7	5208					
	ADEA 0005	DUONE NUMBER	EVTENCION				
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION				
PHONE	( 469 ) 759-3485						
	( 10) /	737 3 103					
9 REPORT TYPE	15th day after campaign treasurer appointment (Officeholder Only)						
	July 15 Exceeded Modified Final Report (Attach C/OH - FR)  Reporting Limit						
10 PERIOD COVERED	Month	Day Year	Month	Day Year			
COVERED	01 / 01 / 2023 THROUGH 06 / 30 / 2023						
11 ELECTION ELECTION DATE  Month Day Year Primary Runoff Other Description							
							/
	/						
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	n)			
	Dallas Count	y Justice of the Peace	e 4-2 Dallas County Jus	tice of the Peace 4-2			
14 NOTICE FROM POLITICAL	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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL COMMITTEE ADDRESS						
Additional Pages	COMMITTEE CAMPAIGN TOFACUEFD NAME						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS				
	1	20.70	DACE 2				
I		GO 10	PAGE 2				

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 2

15 C/OH NAME Hon. Sasha More	6 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ 52.40				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	THE \$				
18 SIGNATURE  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.						
Sosha Moreno						
	Signature or Care	lidate or Officeholder				
	Please complete either option below:					
~~	~~~~~~					
S OTAP	Myesha Conerway					
(1) Affidavit	My Commission Expires 08/09/2024					
5 3/2	ID No 124538376					
~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
NOTARY STAMP/SEAL						
7 7	before me by Sasha Morco this the	day of July.				
20 <u>J</u> , to certify	which, witness my hand and seal of office.					
Much	I Consular Myesty Core	reary Moterry				
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath				
Property Control of the Control of t	OR	Children of the Children of th				
(2) Unsworn Declaration	on					
My name is	, and my date of birth is					
My address is						
9,500 · • • • • • • • • • • • • • • • • • •	(street) (city) (sta	te) (zip code) (country)				
Executed in	County, State of , on the day of (month)	, 20 .				
Excedited III	(month)	, 20 (year)				
	Signature of Candidat	e/Officeholder (Declarant)				

### SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Co	20 Filer ID (Ethics Commission Filers)	
	Hon. Sasha Moreno			
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ N/A	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$ N/A	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER	\$		