# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### RECEIVED FORM COH COVER SHEET PG 1 ELECTIONS DEPARTMENT

The C/OH Instruction G	Suide explains how	to complete this form.	1 Filer ID (Ethics Commission		FM 12:148
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	MICHAEL	A	OFFIC	E USE ONLY
NAME	NICKNAME	OROZCO	SUFFIX	Date Received	,
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX	: APT / SUITE #;	CITY; STATE; ZIP COL	DE .	
ADDRESS  Change of Address		DERBILT AU TR 75206			
5 CANDIDATE/	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-deliver	red or Date Postmarked
OFFICEHOLDER PHONE	(214)	236-0463		Receipt #	Amount \$
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST MICHAEL	MI		Amount \$
NAME	NICKNAME	LAST	SUFFIX		
		MONTOYA		Date Imaged	
7 CAMPAIGN	The second secon	(NO PO BOX PLEASE); APT / S		STATE;	ZIP CODE
TREASURER ADDRESS	1	CKSUN ST =			
(Residence or Business)	DAMA				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER 104 - 2280	EXTENSION		
9 REPORT TYPE	-				
9 REPORT TIPE	January 15	30th day before e	election Runoff	treasurer	after campaign r appointment older Only)
8	July 15	8th day before ele	ection Exceeded Mod Reporting Limit	I I III I I I I I I I I I I I I I I I	port (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year			ear
	67	101/2021	THROUGH	2/31/2	021
11 ELECTION	ELECTION DA		ELECTION Other		
	Month Day	Teal	Runoff Other Descr		
	03/01/	2022	Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (	(if known)	
14 NOTICE FROM	THIS BOX IS FOR NOTIC	CE OF POLITICAL CONTRIBUTIONS	ACCEPTED OR POLITICAL EXPENDITION	TIRES MADE BY POLITICAL C	COMMITTEES TO SUPPORT
POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	SEHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT TH RED TO REPORT THIS INFORMATION O	HE CANDIDATE'S OF OFFICER	OI DEDIC KNOW! FROE OR
,	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			8
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS		
		GO TO	PAGE 2		

# CANDIDATE / OFFICEHOLDER DALLAS COUNTY CAMPAIGN FINANCE REPORT LECTIONS DEPORTMENT

#### FORM C/OH COVER SHEET PG 2

OAIMI AIGI	WI MANUE ILLI OILI		
15 C/OH NAME	2022	JAN 18 PM 12: 49 16 FII	er ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CO PLEDGES, LOANS, OR GUARANTE CONTRIBUTIONS MADE ELECTROI	ES OF LOANS, OR	\$ 12,880.
	2. TOTAL POLITICAL CONTRIBUTI (OTHER THAN PLEDGES, LOANS, C		\$ 12,880. ~
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EX	PENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITUR	:ES	\$ 2972.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	S MAINTAINED AS OF THE LAST DAY	\$ 11,866.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL LAST DAY OF THE REPORTING PE		\$ 46, 500. w
18 SIGNATURE I S	swear, or affirm, under penalty of perjury, that the	ne accompanying report is true and	correct and includes all information
	quired to be reported by me under Title 15, Election		
		Signature of Candidate	- Office Holder
		Signature of Candidate	of Officeriolder
	Please complete	e either option below:	
	,		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	Marisol Aguayo		
(1) Affidavit	My Commission Expires		
(I) Allidavit	1D No 132746466		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
NOTARY STAMP/SEA	L		
	Λ	. 10	an .
Sworn to and subscribed	before me by Murus O	epulse this the 18	day of,
20 22 , to certify	which, witness my hand and seal of office.	V 0	•
marisal a	lywy Marisol Agu	ayo Nota	on Dublic
Signature of officer administe	ering oath Printed name of officer ac	dministering oath	itle of officer administering oath
	OR		the eventual administrating data
(2) Usassa Basis st			
(2) Unsworn Declarati	on		
M			
			·
My address is		.,,,	·
	(street)	(city) (state)	(zip code) (country)
Executed in	County, State of, or	n the day of	, 20
		(month)	(year)
		Signature of Candidate/Off	ficeholder (Declarant)

#### SUBTOTALS - C/OH

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS DEPORTMENT

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

\$

2022 JAN 18 PM 12: 1,9 19 FILER NAME 20 Filer ID (Ethics Commission Filers) MICHAEL OROZCO 21 SCHEDULE SUBTOTALS SUBTOTAL NAME OF SCHEDULE **AMOUNT** 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 12880 W 2 \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 3. \$ SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS 4. \$ \$ 2972.94 5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. \$ 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 FUNDS 10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS \$

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

TO FILER

12.

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS SCHEDULE, A1

If the requested information is not applicable, DO NOT include this page in the reportiAN 18 PM 12: 4,9

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
MICHAE	1 OPOZCO			
4 Date		(ID#:)	7 Amount of contribution (\$)	
	SERGIO TOPRES		1.2. (2	
16-27-21	6 Contributor address; City;	State; Zip Code	100.00	
	2800 SPRING CAKS	75/77		
9 Principal occu	HIGHLAND VILLAGE, TX pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
032	A TRANSPORTED PRODUCTIONS OF THE PRODUCTION OF THE PRODUCTION OF THE PROPERTY		POPOSITION VII	
ONNE	12	UPS STOREFI	9N 1	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
	TODD HILL- JONES			
10-27-21	Contributor address; City;	State; Zip Code	100.00	
(0.0-1.0.1	1001 FT 1 1000 1 1 1 1 2010 21	75232		
	604 FT WURTH AV#3013 DA	LLAS IX		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			ions)	
GENERM	MMXGRE	NWOLE		
Date		(ID#:)	Amount of contribution (\$)	
111 00 01	JOHN DELEUN  Contributor address; City;		2×2 m	
10-21-21	Contributor address; City;	State; Zip Code	250. w	
	9004 BECKLEY VIEW AN DA	uns 1 75232		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
CHIEF OF	POLICE	CITY OF FERM	213	
Date	Full name of contributor  ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
	ADAM EDELMAN			
10-29-21	Contributor address; City;	State; Zip Code	100.00	
	10509 CEDES BREAKS VILL MI	75072		
Displant	TOTAL PIPERES VIVI	•	iana	
•	Principal occupation / Job title (See Instructions)  Employer (See Instructions)			
SALE		Comp USI	+	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS OF SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report. 8 PM 12: 49

The Instruction Guide explains how to complete this form.  1 Total pages Schedule A1:				1 Total pages Schedule A1:
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
MICHTA	FL OROZCO			
4 Date	5 Full name of contributor	ut-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
	CLAY DRURY			
	6 Contributor address;		State; Zip Code	100. "
11-1-21			T	,
	3930 MAIN ST	DA MAS	AND THE RESERVE OF THE PARTY OF	
	pation / Job title (See Instructions)		9 Employer (See Instruct	
OWNE	R		LIKE NU A	UTO 13004
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	EPUN MOORE			
	Contributor address;	City;	State; Zip Code	30.
11-1-21	411 ELM ST DA	rus 7	75202	
Principal occup	eation / Job title (See Instructions)		Employer (See Instruct	ions)
ADMINIS	ADMINISTRATION DALMS COUNTY			
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	BEN MACKEY			
11-3-21	Contributor address;	City;	State; Zip Code	50. w
., ,	3710 VIRGINIA	COCKEELL F	75215 HILLIR	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
ADMINIS	MATIUN	87	CITT OF	DESOTO
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	JOE WATTS			
11-3-21	Contributor address;	City;	State; Zip Code	100, "
	8205 FAGLE DR	Rawi Eg	T, TX 75086	
	pation / Job title (See Instructions)		Employer (See Instruc	(35)
POLICE	OFFICER		METHOTIST	HOSPITAL
9				

## RECEIVED FOR FILING MONETARY POLITICAL CONTRIBUTIONS ELECTIONS DESCRIPTIONS A1

If the requested information is not applicable, DO NOT include this page in the report 12: 49

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15
2 FILER NAME M.C.	THEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
11-6-21	JIMMIE PICO 6 Contributor address; City; 5710 VANDERBILT AU DAWS	State; Zip Code  TX 75206	50. 60
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
RET	IRED		
Date	_	(ID#:)	Amount of contribution (\$)
11-8-21	Contributor address; City;  155 LAKESIDE DE 8305 WAS		200. iv
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)
SENIOR SPECIAL AGENT BNSF RAILWAY			
101010	TECHL FORD	NO PICUA	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
1-6-21	R GRAY POWERS  Contributor address; City;  LEGY3 WESTLAKE AV DAW	State; Zip Code	100. ω
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
RAMANO	Exactor PRESIDENT	CARANTERS PORTO	CAND AND ENERGY
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
149-21	Contributor address; City;  4555 KENWOOD AV DAWS	State; Zip Code	50. w
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
LOPN O	PFICER	CORNERSTONE	HOME LENDING

PALLAS COUNTY
ELECTIONS DEP SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report: PM 12: 4.9

1 0					
The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
MICH	EL OROZCO				
4 Date	5 Full name of contributor  ut-of-state PAC (ID#:_	)	7 Amount of contribution (\$)		
1-9-21	JUNATHAM OLBERT  6 Contributor address; City; State  54 CR 3030 MOUNT PLEASANT	te; Zip Code	50, 00		
8 Principal occu		mployer (See Instructi	ons)		
POLICE	OFFICER CIT	M OF Dek	FALB		
Date	Full name of contributor		Amount of contribution (\$)		
149-21		tte; Zip Code	25. w		
		75206			
		mployer (See Instruction	ons)		
MAN	KEER	STANS BLL	IE NOTE		
Date	Full name of contributor out-of-state_PAC (ID#:	)	Amount of contribution (\$)		
1-9-21	Contributor address; City; State 10011 N. CENTIAL EXPLOY DAM	te; Zip Code	50. 0		
	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
941.IST		ELF EMP	50 <u>-</u>		
1101)		TO EACH			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of contribution (\$)		
	SWATI RAY				
11-10-21	Contributor address; City; Star	ite; Zip Code	100. 00		
	5239 MONTICELLO DAMS R	75206	(00.		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
MANAGEMENT CONSULTANT SELF-EMPL			MED		

RECEIVED FOR Fluing DALLAS COUNTY ELECTIONS DEP**SCHEDULE A1** 

If the requested information is not applicable, DO NOT include this page in the reports PM 12: 50

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1:	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
MICH	MEL OROZCO		
4 Date		(ID#:)	7 Amount of contribution (\$)
	JIMMY GOMEZ		200. ~
11-10-21	6 Contributor address; City;	State; Zip Code	200
-	3422 LAMPASAS DALMS	TX 75233	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
DEPUT	CONSTRUCE	DAMS Cour	NTY
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
11-10-21		State; Zip Code	100.00
74	7341 WILD VALLEY DAN	13 TX 75214	
Principal occupation / Job title (See Instructions) Employer (See Instruct			0000000
FINANCIAL CONSULTANTI SELF EMPLOYED			4ED
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
1-10-21	Contributor address; City;	State; Zip Code	25. W
	5735 VANDERBILT AV DAL	735 VANDERBILT AN DALUS TO 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
CEO		ALOBI	
Date	Full name of contributor out-of-state_PAC	: (ID#)	Amount of contribution (\$)
VENTUN JONES  Contributor address; City; State; Zip Co		State; Zip Code	50. w
1-10-21	707 VERMUNT AU PACLAS	TX 75216	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
CEO		SouTHERN BLACK	POLICY AND ADVOCACY NETWER
			1 1 10012

### MONETARY POLITICAL CONTRIBUTIONS RECEIVED FOR FILING DALLAS COUNTY SCHEDULE A1 If the requested information is not applicable, DO NOT include this page in the report. 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) MICHARI OROZCO 7 Amount of contribution (\$) 11-10-21 DANA SHEHEE 6 Contributor address; City; State; Zip Code 200 0 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) PULICE OFFICER DAMS COUNT COLLEGE DISTRICT Full name of contributor \_\_\_\_ out-of-state\_PAC (ID#:\_\_\_\_\_ Date Amount of contribution (\$) BRUCE ANTON Contributor address; City; State; Zip Code 11-10-21 240 9430 SFILMS WATER DAWNS TX 7572 & David TX SELF EMPLOYED LAWYER out-of-state PAC (ID#:\_\_\_\_ Date Full name of contributor Amount of contribution (\$) LUPE FRIAS 11-10-21 Contributor address; Principal occupation / Job title (See Instructions) BEED. DEPUTY CONSTAGLE Full name of contributor \_\_\_\_ out-of-state PAC (ID#\_\_\_\_ Amount of contribution (\$) JUAN 0LIV0 Contributor address; City; State; Zip Code 50. ω 1418 S. FITZHUGH DAWAS TX 75223 | Employer (See Instructions) Principal occupation / Job title (See Instructions) SELF EMPLOYED ATTORNEY ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

RECEIVED FOR FILING DALLAS COUNTY ELECTIONS SCHEDULET A1

If the requested information is not applicable, DO NOT include this page in the report AN 18 PM 12: 50

			100000 1000
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
MICH	AEL CROZCO		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
	KEUIN NICHULSUN		50°
11-10-21		State; Zip Code	50. w
(0 ) (	8 592	88897-0-0755 987-0 <del>8</del> -1 (September 2000)	1989
	10039 PENSIVE DR. DAW	18 TX 75229	
_	pation / Job title (See Instructions)	9 Employer (See Instruct	NAT TO COLUMN 1979 P. C.
BARTEND	ER	THE GRAPEVIN	UE BAR
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
	CHAD WEST		
		State; Zip Code	500. °°
1410-91			
	3606 S. TYLER ST DAUAS	1X 75224	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	
ATORNA	E/	SELF-EMPLO	1ED
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
	FRANK CARABETTA		
1-10-21		State; Zip Code	1000. 6
11 10 01	303 W. DAVIS ST DAWS	TR 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
0WN	ER	303 PESTADA	uNT
Data			
Date		(ID#)	Amount of contribution (\$)
	STEVEN TOPPENS		N.
1410-21	5645 E. WNIVERSTY BLUD #	State; Zip Code	100. 00
	DALAS TX 75206		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
BARTEN		LG TAPS	
- , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		00 1711)	

RECEIVED FOR FILING DALLAS COLLECTIONS SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report 18 PM 12: 50

	7			
The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 15		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
MICE	THEL ORDZED			
4 Date	5 Full name of contributor  uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
	ANDREW KORN			
11-10-21	6 Contributor address; City;	State; Zip Code	2500. w	
	4221 AVONDALE AVE DAW	18 下 75219		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
ATTURI	VEY	SELF EMPI	LOYED	
Date	Full name of contributor	(ID#a)	Amount of contribution (\$)	
	DAUE CHAPMAN		100 00	
11-10-21		State; Zip Code	100.	
2	1601 PICKWICK IN PICHARDS	SUN TX 75082		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
FERR	ED			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
	JUAN JASSO		500,044	
11-10-21	Contributor address; City;	State; Zip Code	250. W	
	821 HAINES AU DAWAS	TX 75206		
TO THE RESERVE OF THE PARTY OF	ation / Job title (See Instructions)	Employer (See Instruct	(1000001 1000 <del>0</del> 11	
JUDGE		DAMAS COU	LNT1	
Date	Full name of contributor	(ID#)	Amount of contribution (\$)	
	TERRANCE JOHNSON		200 10	
11-10-21	Contributor address; City;	State; Zip Code	200.10	
11 10 01	5400 LIVE OAK # 228 DAU	NS 15206		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
BAPTEN	DER	AVENUE SPURTS	BAR & GRILL	

RECEIVED FOR FILING DALLAS COUNTY

ELECTION SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report. JAN 18 PM 12: 50

The	Instruction Guide explains how to complete thi	1 Total pages Schedule A1: 15			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
MICH	AEL OFOZCO				
4 Date		.C (ID#:)	7 Amount of contribution (\$)		
	DOSEPH OPOZEU				
11-10-21	6 Contributor address; City;	State: Zip Code	50. <sup>10</sup>		
11 0 01	October address, Oky,	otate, Zip oode	*		
	4203 SUMMERVILLE AU DAGE	13 TX 75206			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)		
CLERK		POMINGO GAR	CCIA LAW FIRM		
Date	Full name of contributor	C (ID#:)	A		
Date		, , , , , , , , , , , , , , , , , , , ,	Amount of contribution (\$)		
11-10-21	Contributor address; City;	State; Zip Code	L/O. W		
	6875 CAROLYNCREST DR	DAMS R 75714			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)		
PETIRE	D				
1 - 1 1 1 2	V				
Date	Full name of contributor	AC (ID#:)	Amount of contribution (\$)		
	WAYNE GARCIA				
1410-01	Contributor address; City;	State; Zip Code	100 w		
	6.0		700.		
	5410 GODDWIN AU DEURS	TX 75206			
	pation / Job title (See Instructions)	Employer (See Instruct			
REALTU	2	SELF-EMP	LOYED		
Date	Full name of contributor		Amount of anatolicutions (B)		
Bato		AC (ID#:)	Amount of contribution (\$)		
	EUSA CADENA		Inn N		
11-10-27	Contributor address; City;	State; Zip Code	100. "		
	6815 AMERICAN WAY DAG	148 TR 75237			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
PETIPE	₹D				
	V				

RECEIVED FOR FILING	
MACLAN COLDANIA	Δ1
ELECTIONS DEP.	<i>1</i> —4 II

If the requested information is not applicable, **DO NOT include this page in the report.** 

			11 10 11 12: 5U
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
MICH	REL OROZCO		
4 Date		(ID#:)	7 Amount of contribution (\$)
	KIM COVINGTON		
11-10-21	6 Contributor address; City;	State; Zip Code	100 0
	PO BOX 132207 DAMS	R 75313	100.
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
OPERATIO	NS MONAGER	MCCALL PARKHI	IRST HURTON LL.P.
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	TAILLIM SONG		
1-10-21		State; Zip Code	100.00
•	8111 LBJ FRW1 DAMB	TX 75251	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
ATTURNE	e st	SELF-EX	MPLOTED
Date		(ID#)	Amount of contribution (\$)
	HUDSUN HENLEY		
11-10-21		State; Zip Code	500. w
	5415 URSULA LN DAWAS	TX 75229	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
ATTURN	EY	SELF-EMP	LOTED
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
.,	DAVID ESTINOSA		
11-10-21	Contributor address; City;	State; Zip Code	500. w
	1622 AVE. F GRAND PRA		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	tions)
DEPUT	Y CONSTAGLE	DAMAS Co	WATY
			,

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report 127 JAN 18 PM 12: 50

				10 1112.9U	
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 15		
2 FILER NAME				3 Filer ID (Ethics Commission Filers)	
MICH	ASI OROZCO				
4 Date	5 Full name of contributor	out-of-state PA	C (ID#:)	7 Amount of contribution (\$)	
	PATRICK TURNE	R			
11-10-21	6 Contributor address;		State; Zip Code	250. W	
	2626 COLEAN	DAMS -	R 75204		
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
MANAGEMENT CONSULTANOT -			TURNER & ASSOCIATES		
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)	
	ALBERT VILLEGAS	3			
11-10-21	Contributor address;	City;	State; Zip Code		
(( (0 ) )	2121 ALBANY ST	DAMS	75201	100.00	
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			tions)		
ATTURNM			RMINGO GAPRIA LAW FIRM		
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)	
	CHRIS RUIZ				
14-10-21	Contributor address;		State; Zip Code	100. "	
	5673 POWERS ST ?	THE CULU	M TX 75056 Employer (See Instruc		
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)	
DEPUT	CONSTRUCE		Dams Can	XI	
Date	Full name of contributor	out-of-state PA	C (ID#)	Amount of contribution (\$)	
11-10-21	JOHN DAVIS Contributor address;	City;	State; Zip Code	50 ω	
17 10 01	2903 STINIWICE LA	GRANDO		30.	
Principal occur	pation / Job title (See Instructions)	1 CIOPAND I	Employer (See Instruction	tions)	
DEPUT				A	
1715   0(1)	I CON -INDUE		DAWS Con	249	

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS (SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report 18 PM 12: 50

			51 85 10 <del>7</del> 65 <del>7</del>	
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 15	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
MICHA	TEL OPOZCO			
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of contribution (\$)	
	DANN GOMEZ			
1-10-21	6 Contributor address; City;	State; Zip Code	150. w	
	7180 GASTON AU #127	DAMAS JU 757.14		
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
PRIVATE DETECTIVE SELF-EMPL			MBD	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			100	
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)	
	LAURA CADENA			
() . 2)	Contributor address; City;	State; Zip Code	50. <sup>20</sup>	
11-10-21		- 7/2.2		
	6815 AMERICAN WAY D			
Principal occupation / Job title (See Instructions)  Employer (See Instruc			946 CALLOSS \$1.	
CHIEF OF STAPF CHY OF DA			uss	
Date	10 1000 10 10 10 10 10 10 10 10 10 10 10	PAC (ID#:)	Amount of contribution (\$)	
	DANIEL PIVAS			
11-10-21	Contributor address; City;	State; Zip Code	250. w	
	7006 WAKEFIEUD ST DA	MAS TR 75231		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)	
REAUTOR SELF-EMPLOYED				
1 - 1 - 1 - 1				
Date	Full name of contributor out-of-state	e PAC (ID#:)	Amount of contribution (\$)	
	EDDIE SALAZAR			
11-10-01	Contributor address; City;	State; Zip Code	50.00	
	150 ALMA DR FOUNIS	TX 75119		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
CHIEF DEPUTY DAMPS COUNT				
17 TOTAL COLLEGE				



If the requested information is not applicable, DO NOT include this page in the report.

		F. 1 2012 (D-612)	10 1117.00	
The	Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: 15	
2 FILER NAME		3	Filer ID (Ethics Commission Filers)	
MICHA	e opozeo			
4 Date	5 Full name of contributor	7	Amount of contribution (\$)	
	SYLVIA LAGOS			
11-10-1	6 Contributor address; City; State; Zip Co	ode	500. "	
11 10	131 N. MONTCEAIR DR DAWS TR 75	5718		
8 Principal occu	pation / Job title (See Instructions)  9 Employer (Se		)	
CHITEF	4			
Cerried	CUBIC	COUNT		
Date	Full name of contributor	)	Amount of contribution (\$)	
	PICHARD (ROZEO SR.		Con w	
1-10-21	Contributor address; City; State; Zip Co	ode	500. <sup>w</sup>	
11 10 0 (	5707 VANDERBILTAN DAMAS A 752			
	THE HADICIAN DAMS TO 752	206		
Principal occup	pation / Job title (See Instructions) Employer (Se	ee Instructions	)	
RETIR	ED			
Date	Full name of contributor	)	Amount of contribution (\$)	
	KALTYAH MIRANDA			
1-10-21	Contributor address; City; State; Zip Co		100.0	
1110 (	6045. WILLOMET AU DAYS TO 75	208		
Principal occup		ee Instructions	5)	
PRINCIPA	TAST GE	AND P	REPARATION	
Date	Full name of contributor	)	Amount of contribution (\$)	
	HECTOR FLORES			
11-10-21	Contributor address; City; State; Zip Co	de	100.0	
	1030-TRACY AW DAWNS TR 751	37		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
REORRED				
40				

RECEIVED FOR FILING
DALLAS COUNTY
ELECTIONS DE SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report 8 Ph 12: 50

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 15	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
MICHAE	U OPOZEO			
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of contribution (\$)	
11-12-21	DOBY VILLALPANDO  6 Contributor address; City; S 10208 (RESTOVER DR DAMS TX 75229	tate; Zip Code	50. ω°	
8 Principal occu	,	Employer (See Instructio	ns)	
TECHNICA	N PR	LESBTEPIAN H	USPITAL	
Date	Full name of contributor	:)	Amount of contribution (\$)	
1-14-21	TIM LACZKOWSKI  Contributor address; City; S  ESIS FOREST HILLS BLVD DAL	State; Zip Code  48 17 75216	100. "	
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
PAPTNER ALTACREST (			PITAL	
Date		)	Amount of contribution (\$)	
11-15-21	AVEXANDRA GUIO  Contributor address; City; S  3105 SAN TACINTO ST #303 DAV	itate; Zip Code	50°	
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
ATTURNMY SELF-EMPLOYED				
Date	Full name of contributor		Amount of contribution (\$)	
1-21-21	Contributor address; City; S  1118 WILTSHIRE DR CARROLL	State; Zip Code 75007	250. W	
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  SELF-EMPLOYED				
364-			EO	

RECEIVED FOR FILING DAULAS COUNTY

ELECTIONS DET SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report. PM 12: 50

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 15		
2 FILER NAME MICH	HER OROZIO	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)		
	BETTY CROZCO			
11-21-21	6 Contributor address; City; State; Zip Code	100. 0.		
	2329 KENESAW DR DAWNS TR 75212			
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	tions)		
PENL				
Date	Full name of contributor	Amount of contribution (\$)		
7	JUAN AYALA			
16-96-11	Contributor address; City; State; Zip Code	25. w		
	9668 APPERAILL DAWS TR 75243			
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tions)		
ADMINI	STRATION FEMA			
Date	Full name of contributor	Amount of contribution (\$)		
	GURIA AYALA BOUDEN			
12-3-21	Contributor address; City; State; Zip Code	100. w		
10 701	109 TUNITY LN WARANCHIETX 75165	ē		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)		
	JOHN BARR			
12-13-21	Contributor address; City; State; Zip Code	200. w		
	POBOX 223667 DAWS TR 75222			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
1				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED		

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

RECEIVED FOR FILING DALLA SCHEDULE F1
ELECTIONS DEPARTMENT

If the requested information is not applicable, DO NOT include this page in the report.

		*772.5	115 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Fees Office Offi		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME MICHAEL OROZCO		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name THE PUR HUSE		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
800. W	1919 SEILLMAN ST	DAMAS	TX 75206
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	FOUT / BEVERAGE EXPENSE		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
11-15-21	DALMS COUNTY DEMOCE	2ATIC PART	9
Amount (\$)	Payee address;	City;	State; Zip Code
1000.00	1414 N. WASHINGTON N T	DAWS TR	75204
	Category (See Categories listed at the top of this schedule)	Description	,
PURPOSE OF EXPENDITURE	FLUNG FEE		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
12-10-21	KTR SCREEN GRAN	PHICS	
Amount (\$)	Payee address;	City;	State; Zip Code
1172.94	3915 MAIN ST DAY	US, TR 7	'S2Z6
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Pantint		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			