JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. MS / MRS / MR OFFICE USE ONLY CANDIDATE / **OFFICEHOLDER** Date Received NAME SUFFIX NICKNAME STATE; ZIP CODE 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #: **OFFICEHOLDER** redacted for web posting MAILING **ADDRESS** redacted for web posting Change of Address EXTENSION PHONE NUMBER Date Hand-delivered or Date Postmarked 5 CANDIDATE/ AREA CODE **OFFICEHOLDER** PHONE Amount \$ Receipt # MI MS / MRS / MR FIRST CAMPAIGN TREASURER Date Processed NAME SUFFIX NICKNAME Date Imaged STATE; ZIP CODE CITY; STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 7 CAMPAIGN redacted for web posting TREASURER redacted for web posting ADDRESS (Residence or Business) PHONE NUMBER **EXTENSION** CAMPAIGN AREA CODE TREASURER redacted for web PHONE nacting 15th day after campaign 9 REPORT TYPE Runoff 30th day before election January 15 treasurer appointment (Officeholder Only) Exceeded Modified Final Report (Atlach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Day Month COVERED THROUGH **ELECTION TYPE ELECTION DATE** 11 ELECTION Other Description Primary Runoff Month Day Year General Special 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE 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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS

JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **COVER SHEET PG 2** CAMPAIGN FINANCE REPORT 16 Filer ID (Ethics Commission Filers) 15 JC/OH NAME TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR 0 TOTALS CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE. TOTALS TOTAL POLITICAL EXPENDITURES CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY 385.08 BALANCE OF REPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE OUTSTANDING LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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. redacted for web posting Signature of Candigate/Officeholder Please complete either option below: APRIL HENSON Notary Public, State of Texas My Commission Expires January 23, 2027 (1) Affidavit NOTARY ID 13415848-1 NOTARY STAMP/SEAL Sworn to and subscribed before me by Patsy Sosa Sanchez this the 10 redacted for web posting Printed name of officer administering oath Signature of officer administering oath (2) Unsworn Declaration ___, and my date of birth is ___ My name is ___ My address is _____ (city) (zip code) (street) Executed in _____ County, State of _____ , on the ____ day of (month) Signature of Candidate/Officeholder (Declarant)