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 / OFFICEHOLDER	MS / MRS / MR	MS/MRS/MR FIRST MI TAMES		МІ	OFFICE USE ONLY		
NAME	NICKNAME	DAK les	4	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX		CITY; STATE;	ZIP CODE	RECE		
ADDRESS Change of Address	P.O. Box 12	21 Spiles	wood, TX -	18669	BURNET CO	2 2022 ELECTIONS	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 144-5205	EXTENS	SION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	2	Mi	Receipt #	Amount \$	
	NICKNAME	SAME	Date Processed Date Imaged				
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	(NO PO BOX PLEASE); APT / S	UITE #; CITY	<i>(</i> ;	STATE;	ZIP CODE	
(Residence or Business)	116 ComBs Alley						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENS	ION			
	()	SAME					
9 REPORT TYPE	January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)					pointment	
	July 15 8th day before election Exceeded Modified Reporting Limit				Final Repor	t (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year Month Day Year 2 / 22 / 22 THROUGH 07 / 12 / 22						
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff Other Description 1 8 2 2 General Special						
12 OFFICE	OFFICE HELD (If any) Lightly Indge 13 OFFICE SOUGHT (If known) Lightly Indge						
14 NOTICE FROM POLITICAL COMMITTEE(S)	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.						
	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	GENERAL	GENERAL COMMITTEE ADDRESS					
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
) ** 		COMMITTEE 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 Filer ID (Ethics Commission Filers)						
17 CONTRIBUTION TOTALS	1. 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	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	TDAY \$ 29,170.53					
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF 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.							
1 Dakla							
Signature of Candidate or Officeholder							
Please complete either option below:							
AN ARE desire							
(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 administe	ring oath Printed name of officer administering oath	Title of officer administering oath					
OR							
(2) Unsworn Declaration							
My name is							
My address is 116 ComBs Alley , Spilewood, TX, 78669, USA.							
My name is							
	(month	J. Callen					
	Signature of Candid	ate/Officeholder (Declarant)					