

## NOTICE OF DEADLINE TO FILE APPLICATIONS FOR PLACE ON THE BALLOT

(AV/SO DE FECHA LIM/TE PARA PRESENTAR SOLICITUDES PARA UN LUGAR EN LA BOLETA)

(THÔNG BÁO VỀ THỜI HẠN Nộp Đơn Xin Ghi Tên Tranh Cử Trong Lầu Phiếu)

**Notice is hereby given that applications for a place on the Town of Lakeside May 3, 2026 General Election Ballot may be filed during the following time:**

*Par la presente se da aviso de que las solicitudes para un lugar en la Boleta de la Elección General del 3 de mayo de 2026 de la Ciudad de Lakeside se pueden presentar durante el siguiente horario*

*Theo đây xin thông báo thời gian nộp đơn xin ghi tên tranh cử, trong Lầu Phiếu Cuộc Tổng Tuyển Cử, ngày 3 tháng Năm, 2026 của Thành Phố Lakeside là như sau*

### **FILING DATES AND TIMES:**

*Fechas y Horario para entregar Presentaciones Ngay bắt đầu:*

#### **Start Date:**

**January 14, 2026**

#### **End Date:**

**February 13, 2026\***

*Fecha Inicio*

*14 de enero de 2026*

*Fecha Limite Ngay*

*13 de febrero de 2026*

*Ngay bắt đầu:*

*Ngày 14 tháng Ba 2026*

*ket thốt*

*ngày 13 tháng Ba 2026*

#### **Office Hours:**

**7:00 a.m. - 5:30 p.m.**

*Horario de la oficina*

*Gia Lam Visca của Văn Phòng*

### **Physical address for filing applications in person for place on the ballot:**

*Dirección a física para presentar las solicitudes en persona para un lugar en la boleta Dia chi toa nha nai quy vi c6 th/J aich than aen n{p aan ghi ten tranh cu trong la phieu la*

**Town of Lakeside  
9834 Confederate Park Rd  
Lakeside, Texas**

### **Address to mail applications for place on the ballot (if filing by mail)**

*Dirección a donde enviar las solicitudes para un lugar en la boleta en caso de presentar par correo Dia chi bu'u tin nai quy vi c6 th/J gui aan xin ghi ten tranh cu trong la phieu (neu n{p aan bang thu')*

**Town of Lakeside  
9834 Confederate Park Rd  
Lakeside, Texas 76108**

### **Norman Craven, City Secretary**

**Printed Name of Filing Officer**

*Nombre impreso del oficial de presentación*

*Tên in của nhân viên nộp đơn*

**Signature of Filing Official**

*Firma del Oficial de Presentación*

*Chữ ký của chính thức nộp đơn*

**December 15, 2025**

**Date Posted**

*Fecha de publicación*

*Ngày đăng*

**The Town of Lakeside is closed on Fridays, therefore the deadline for applications will be Monday February 16, 2026 at 5:30 PM**



## TOWN OF LAKESIDE

9834 CONFEDERATE PARK RD

LAKESIDE, TX 76108

[www.lakesidetexas.us](http://www.lakesidetexas.us)

[lakeside@lakesidetexas.us](mailto:lakeside@lakesidetexas.us)

TO: CANDIDATES FOR CITY COUNCIL: MAY 3, 2026, GENERAL ELECTION

FROM: Norman Craven, CITY SECRETARY

DATE: December 15, 2025

**RE: ELECTION INFORMATION - INDEX**

This Election Packet has been prepared for candidates in the City Council Election to be held on May 3, 2026, for electing Council members to Places; 1, 3 and 5.

1. Letter to the candidate
2. Application for a Place on the Town of Lakeside General Election Ballot. This must be filed in the City Secretary's Office between the hours of 7:00 a.m. and 5:30 p.m., beginning Wednesday, January 14, 2026, and ending Friday, February 13, 2026, at 5:00 PM. *(The Town of Lakeside is closed on Fridays; therefore, the deadline is extended to Monday February 16, 2026, at 5:30 PM).*
3. Appointment of a Campaign Treasurer by a Candidate (and Instruction Guide). This form is to be filed in the City Secretary's Office as soon as you become a candidate and before you make any expenditure or accept any contributions.
4. A Calendar of Important Dates.
5. Campaign Finance Instruction Guide.
6. Candidate/Officeholder Campaign Finance Report Form. This report is to be filed in the City Secretary's Office by the dates specified on the enclosed calendar.

If you have filed for office in the past, please note that many of the forms have been revised. Additional blank copies of these forms are available in my office or on our website. For questions regarding the Texas Ethics Commission reports, please contact them at 1-512-463-5800.

For questions regarding this election, please contact me at 817-230-4181 or email at [ncraven@lakesidetexas.us](mailto:ncraven@lakesidetexas.us).



## TOWN OF LAKESIDE

9834 CONFEDERATE PARK RD

LAKESIDE, TX 76108

[www.lakesidetexas.us](http://www.lakesidetexas.us)

[lakeside@lakesidetexas.us](mailto:lakeside@lakesidetexas.us)

December 15, 2025

Dear candidate;

Thank you for your interest in becoming a candidate for the City Council of the Town of Lakeside. This year we will be electing three (3) citizens to serve. Council Members Place 1, 3 and 5. All places on the City Council are at-large and can be held by any qualified candidate. Each member elected will serve a two-year term, from May 2026 to May 2028.

Choosing to run for a City Council seat is an important decision. Serving as a Councilmember is a large responsibility which should not be taken lightly. There is more to serving on the City Council than just the regular monthly Council meetings. The Council needs all its members present at meetings to operate effectively.

Councilmembers may need to rearrange their schedules to accommodate the meeting schedule. Current

Some of the expectations of serving as a Councilmember include:

- Attend one regular (1) council meetings per month as scheduled (2nd Thursday).
- Attend special meetings, as needed.
- Read the agenda materials supplied before meetings.
- Plan to attend additional special meetings during July and August September to review and adopt the proposed annual budget.
- Serve as Council Liaison to City Boards and Commissions, as assigned.
- Attend assigned board/commission meetings, as needed.
- Complete new Councilmember training.

If you need more details or need more information, please do not hesitate to contact me.

**Norman Craven, City Secretary**



**Town of Lakeside**  
**Application Affidavit for Candidate for Office**

I, \_\_\_\_\_, do hereby declare that I am a Candidate for office of City Council Place \_\_\_\_\_ and request that my name be printed upon the ballot for that particular office in the next Town election. I am \_\_\_\_\_ years of age (being at least 18 years old); a registered voter of the Town of Lakeside; have been a resident of the State of Texas for at least 12 consecutive months prior to the filing date for this election, and a resident of the Town of Lakeside for at least 6 months prior to the filing date for the election; do not hold more than one public elective officer; do not hold an appointed office in the Town (excluding board, committees, and commission); have not been determined mentally incompetent by a final judgement of a court; and have not been convicted, whether final for appeal purposes or not, of a felony from which I have not been pardoned or otherwise released from the resulting disabilities. I swear that I will support and defend the Constitution and laws of the United States and the State of Texas.

\_\_\_\_\_  
Signature of Candidate

Subscribed and Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2026

To be completed by Town Secretary:  
I received this application on

\_\_\_\_\_  
Signature of Town Secretary



## Loyalty Affidavit

I, \_\_\_\_\_, of the Town of Lakeside, County of Tarrant, State of Texas, being a candidate for the office of \_\_\_\_\_, do solemnly swear that I believe in and approve of our present representative form of government and will resist any effort or movement from any source which seeks to subvert or destroy the same or any part thereof, and I will support and defend the Constitution and Laws of the United States and of the State of Texas.

\_\_\_\_\_

Candidate's Signature

Sworn to and subscribed before me on this the \_\_\_\_\_ day of \_\_\_\_\_ 2026

\_\_\_\_\_

Notary Public

(SEAL)

In and for the Town of Lakeside.

**APPLICATION FOR A PLACE ON THE BALLOT FOR A GENERAL ELECTION  
FOR A CITY, SCHOOL DISTRICT OR OTHER POLITICAL SUBDIVISION**

ALL INFORMATION IS REQUIRED TO BE PROVIDED UNLESS INDICATED AS OPTIONAL<sup>1</sup> Failure to provide required information may result in rejection of application.

<b>APPLICATION FOR A PLACE ON THE _____ GENERAL ELECTION BALLOT</b>					
TO: City Secretary/Secretary of Board (name of election)					
I request that my name be placed on the above-named official ballot as a candidate for the office indicated below.					
<b>OFFICE SOUGHT</b> (Include any place number or other distinguishing number, if any.)				<b>INDICATE TERM</b> <input type="checkbox"/> FULL <input type="checkbox"/> UNEXPIRED	
<b>FULL NAME</b> (First, Middle, Last)			<b>PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT*</b>		
<b>PERMANENT RESIDENCE ADDRESS</b> (Do not include a P.O. Box or Rural Route. If you do not have a residence address, describe location of residence.)			<b>PUBLIC MAILING ADDRESS (Optional)</b> (Address for which you receive campaign related correspondence, if available.)		
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>PUBLIC EMAIL ADDRESS (Optional)</b> (Address for which you receive campaign related emails, if available.)		<b>OCCUPATION (Do not leave blank)</b>		<b>DATE OF BIRTH</b> / /	<b>VOTER REGISTRATION VOID NUMBER<sup>2</sup> (Optional)</b>
<b>TELEPHONE CONTACT INFORMATION (Optional)</b> Home: _____ Office: _____ Cell: _____					
<b>FELONY CONVICTION STATUS (You MUST check one)</b>		<b>LENGTH OF CONTINUOUS RESIDENCE AS OF DATE THIS APPLICATION WAS SWORN</b>			
<input type="checkbox"/> I have not been finally convicted of a felony.		<b>IN THE STATE OF TEXAS</b>  _____ year(s)  _____ month(s)		<b>IN TERRITORY/DISTRICT/PRECINCT FROM WHICH THE OFFICE SOUGHT IS ELECTED</b>  _____ year(s)  _____ month(s)	
<input type="checkbox"/> I have been finally convicted of a felony, but I have been pardoned or otherwise released from the resulting disabilities of that felony conviction and I have provided proof of this fact with the submission of this application. <sup>3</sup>					
*If using a nickname as part of your name to appear on the ballot, you are also signing and swearing to the following statements: I further swear that my nickname does not constitute a slogan or contain a title, nor does it indicate a political, economic, social, or religious view or affiliation. I have been commonly known by this nickname for at least three years prior to this election. Please review sections 52.031, 52.032 and 52.033 of the Texas Election Code regarding the rules for how names may be listed on the official ballot.					
Before me, the undersigned authority, on this day personally appeared (name of candidate) _____, who being by me here and now duly sworn, upon oath says: "I, (name of candidate) _____, of _____ County, Texas, being a candidate for the office of _____, swear that I will support and defend the Constitution and laws of the United States and of the State of Texas. I am a citizen of the United States eligible to hold such office under the constitution and laws of this state. I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote. I am aware of the nepotism law, Chapter 573, Government Code. I am aware that I must disclose any prior felony conviction, and if so convicted, must provide proof that I have been pardoned or otherwise released from the resulting disabilities of any such final felony conviction. I am aware that knowingly providing false information on the application regarding my possible felony conviction status constitutes a Class B misdemeanor. I further swear that the foregoing statements included in my application are in all things true and correct."					
<b>X</b> _____ <b>SIGNATURE OF CANDIDATE</b>					
Sworn to and subscribed before me this the _____ day of _____, _____, by _____. (day) (month) (year) (name of candidate)					
Signature of Officer Authorized to Administer Oath <sup>4</sup>			Printed Name of Officer Authorized to Administer Oath		
_____ Title of Officer Authorized to Administer Oath			Notarial or Official Seal		
<b>TO BE COMPLETED BY FILING OFFICER: THIS APPLICATION IS ACCOMPANIED BY THE REQUIRED FILING FEE (If Applicable) PAID BY:</b> <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASHIERS CHECK OR <input type="checkbox"/> PETITION IN LIEU OF A FILING FEE. This document and \$_____ filing fee or a nominating petition of _____ pages received. <input type="checkbox"/> <b>Voter Registration Status Verified</b>					
_____/_____/_____ Date Received		_____/_____/_____ Date Accepted		(See Section 1.007) _____ Signature of Filing Officer or Designee	

## INSTRUCTIONS

An application for a place on the general election for a city, school district or other political subdivision, may not be filed earlier than 30 days before the deadline prescribed by this code for filing the application. An application filed before that day is void. All fields of the application **must** be completed unless specifically marked optional.

For an election to be held on a uniform election date, the day of the filing deadline is the 78th day before Election Day.

If you have questions about the application, please contact the Secretary of State's Elections Division at 800-252-8683.

## NEPOTISM LAW

The candidate must sign this statement indicating his awareness of the nepotism law. When a candidate signs the application, it is an acknowledgment that the candidate is aware of the nepotism law. The nepotism prohibitions of chapter 573, Government Code, are summarized below:

No officer may appoint, or vote for or confirm the appointment or employment of any person related within the second degree by affinity (marriage) or the third degree by consanguinity (blood) to the officer, or to any other member of the governing body or court on which the officer serves when the compensation of that person is to be paid out of public funds or fees of office. However, nothing in the law prevents the appointment, voting for, or confirmation of anyone who has been continuously employed in the office or employment for the following period prior to the election or appointment of the officer or member related to the employee in the prohibited degree: six months, if the officer or member is elected at an election other than the general election for state and county officers.

No candidate may take action to influence an employee of the office to which the candidate is seeking election or an employee or officer of the governmental body to which the candidate is seeking election regarding the appointment or employment of a person related to the candidate in a prohibited degree as noted above. This prohibition does not apply to a candidate's actions with respect to a bona fide class or category of employees or prospective employees.

## FOOTNOTES

<sup>1</sup>An application for a place on the ballot, including any accompanying petition, is public information immediately on its filing. (Section 141.035, Texas Election Code)

<sup>2</sup>Inclusion of a candidate's VUID is optional. However, many candidates are required to be registered voters in the territory from which the office is elected at the time of the filing deadline. Please visit the Elections Division of the Secretary of State's website for additional information. <http://www.sos.state.tx.us/elections/laws/hb484-faq.shtml>

<sup>3</sup>Proof of release from the resulting disabilities of a felony conviction would include proof of judicial clemency under Texas Code of Criminal Procedure 42A.701, proof of executive pardon under Texas Code of Criminal Procedure 48.01, or proof of a restoration of rights under Texas Code of Criminal Procedure 48.05. (Texas Attorney General Opinion KP-0251)

**One of the following documents must be submitted with this application.**

Judicial Clemency under Texas Code of Criminal Procedure 42A.701

Executive Pardon under Texas Code of Criminal Procedure 48.01

Restoration of Rights under Texas Code of Criminal Procedure 48.05

<sup>4</sup>All oaths, affidavits, or affirmations made within this State may be administered and a certificate of the fact given by a judge, clerk, or commissioner of any court of record, a notary public, a justice of the peace, city secretary (for a city office), and the Secretary of State of Texas. See Chapter 602 of the Texas Government Code for the complete list of persons authorized to administer oaths.

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA  
PG 1

See CTA Instruction Guide for detailed instructions.		1 Total pages filed:	
2 CANDIDATE NAME	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX		
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Filer ID #	
		Date Received	
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Date Hand-delivered or Postmarked	
	( )	Receipt # Amount \$	
5 OFFICE HELD (if any)		Date Processed	
		Date Imaged	
6 OFFICE SOUGHT (if known)			
7 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI NICKNAME LAST SUFFIX		
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; APT / SUITE #; CITY; STATE; ZIP CODE		
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
	( )		
10 CANDIDATE SIGNATURE	<p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> <p>_____ Signature of Candidate</p> <p>_____ Date Signed</p>		
GO TO PAGE 2			



# CANDIDATE MODIFIED REPORTING DECLARATION

FORM CTA  
PG 2

11 CANDIDATE  
NAME

12 MODIFIED  
REPORTING  
DECLARATION

## COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING

•• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••

•• The modified reporting option is valid for one election cycle only. ••  
(An election cycle includes a primary election, a general election, and any related runoffs.)

• Candidates for the office of state chair of a political party may NOT choose modified reporting. ••

I do not intend to accept more than \$1,140 in political contributions or make more than \$1,140 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.

\_\_\_\_\_  
Year of election(s) or election cycle to  
which declaration applies

\_\_\_\_\_  
Signature of Candidate

**This appointment is effective on the date it is filed with the appropriate filing authority.**

TEC Filers may send this form to the TEC electronically at [treasappoint@ethics.state.tx.us](mailto:treasappoint@ethics.state.tx.us)  
or mail to  
Texas Ethics Commission  
P.O. Box 12070  
Austin, TX 78711-2070

**Non-TEC Filers must file this form with the local filing authority  
DO NOT SEND TO TEC**

For more information about where to file go to:  
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)		<b>2</b> Total pages filed:			
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI			<b>OFFICE USE ONLY</b>			
	..... NICKNAME LAST SUFFIX						
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			Date Received			
<b>5</b> CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( )						
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI ..... NICKNAME LAST SUFFIX						
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( )						
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
<b>10</b> PERIOD COVERED	Month / Day / Year      THROUGH      Month / Day / Year						
<b>11</b> ELECTION	<table style="width:100%; border: none;"> <tr> <td style="width: 30%; border: none;">           ELECTION DATE            Month / Day / Year         </td> <td style="border: none;">           ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input type="checkbox"/> General    <input type="checkbox"/> Special    _____         </td> </tr> </table>					ELECTION DATE Month / Day / Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special    _____
ELECTION DATE Month / Day / Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special    _____						
<b>12</b> OFFICE	OFFICE HELD (if any)		<b>13</b> OFFICE SOUGHT (if known)				
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	<p><small>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.</small></p> <table style="width:100%; border: none;"> <tr> <td style="width: 15%; border: none; vertical-align: top;">           COMMITTEE TYPE   <input type="checkbox"/> GENERAL   <input type="checkbox"/> SPECIFIC         </td> <td style="border: none;">           COMMITTEE NAME            _____            COMMITTEE ADDRESS            _____            COMMITTEE CAMPAIGN TREASURER NAME            _____            COMMITTEE CAMPAIGN TREASURER ADDRESS            _____         </td> </tr> </table>					COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME _____ COMMITTEE ADDRESS _____ COMMITTEE CAMPAIGN TREASURER NAME _____ COMMITTEE CAMPAIGN TREASURER ADDRESS _____
COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME _____ COMMITTEE ADDRESS _____ COMMITTEE CAMPAIGN TREASURER NAME _____ COMMITTEE CAMPAIGN TREASURER ADDRESS _____						

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>15 C/OH NAME</b>		<b>16</b> Filer ID (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 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.

\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(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 administering oath

Printed name of officer administering oath

Title of officer administering oath

**OR**

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

2 Filer ID (Ethics Commission Filers)

## 3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

## 4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

### A. CAMPAIGN FUNDS

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

### B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

## 5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder