# CAND DATE / OFF CEHOLDER CAMPA GN F NANCE REPORT

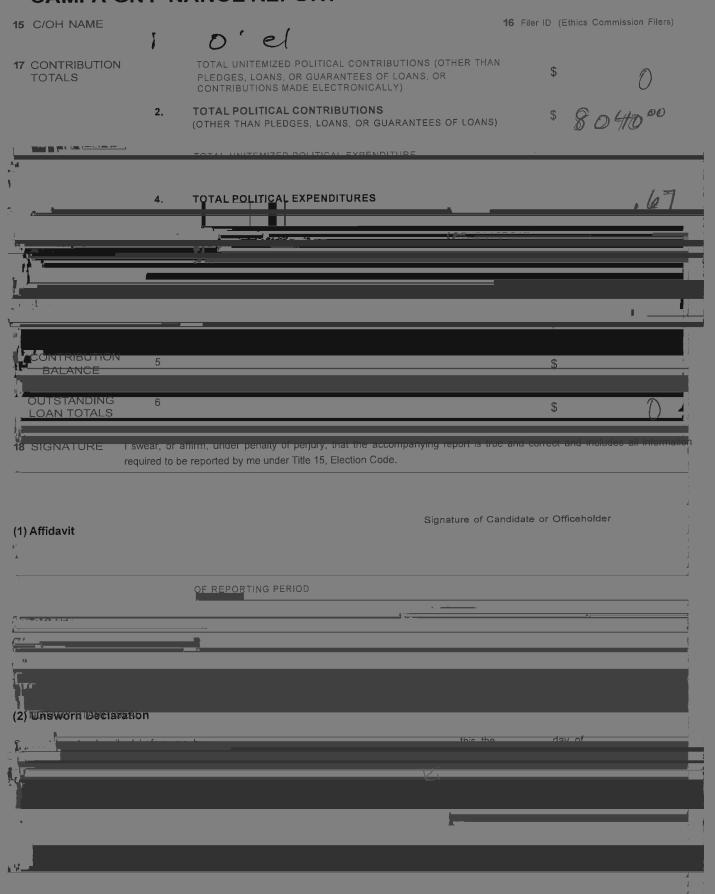
#### FORM C/OH COVER SHEET PG 1

	The C/OH Instruction G	uide explains how to comple	ete this form.	Filer ID (Ethics Comm	nission Filers)	2 Total pages file	d
3	CANDIDATE / OFFICEHOLDER NAME	MS (MRS) MR  NICKNAME	FIRST	s	UFFIX	OFFICE U	JSE ONLY
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	LOF W. H	vnt, McK	inney, TX	1P CODE		
	Change of Address						
5	CANDIDATE/ OFFICEHOLDER PHONE		NUMBER 5-6628	EXTENSION		Date Hand-delivered	
6	CAMPAIGN TREASURER NAME	ind	1	,		Receipt #	Amount \$
						Date Processed	
7	CAMPAIGN	STREET ADDRESS (NO PO BOX	PLEASE); APT / SUITE #;	CITY;	VETIX-	STATE;	ZIP CODE
•	TREASURER	<i>Ea.</i> 17 0	0011	M.U'	10.61.1	70	75.07.0
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ì		100	) <u>e</u>	EXTENSION	,	Page Income	:
ช	CAMPAIGN TREASURER PHONE	(214) 504	-5212				
9	REPORT TYPE	January 15	30th day before election	Runoff	=		
		July 15	8th day before election	Reportin	d Modified g Limit		
10	PERIOD	Month Day	Year		Month	Day Year	
	COVERED	1/19	/20	THROUGH	4/	6/20	23
11	ELECTION						
		5/6/23					(Attach C/OH - FR)
12	OFFICE	OFFICE HELD (if any)  MIS D Schoo		13 OFFICE SOUC	GHT (if known)		ome
14	DOLITICAL	THIS BOX IS FOR NOTICE OF POLITIC THE CANDIDATE / OFFICEHOLDER. TO CONSENTELEANDIDATESTAND OFFICE  Month Day	THESE EXPENDITURES MAY H	AVE BEEN MADE WITH	OUT THE CANDID	ATE'S OR OFFICEHOLD	ER'S KNOWLEDGE OR
	Additional Pages						
		COMMITT	EE CAMBAIGN TREASURE	PNAME			

**GO TO PAGE 2** 

# CANDIDATE / OFFICEHOLDER CAMPA GN F NANCE REPORT

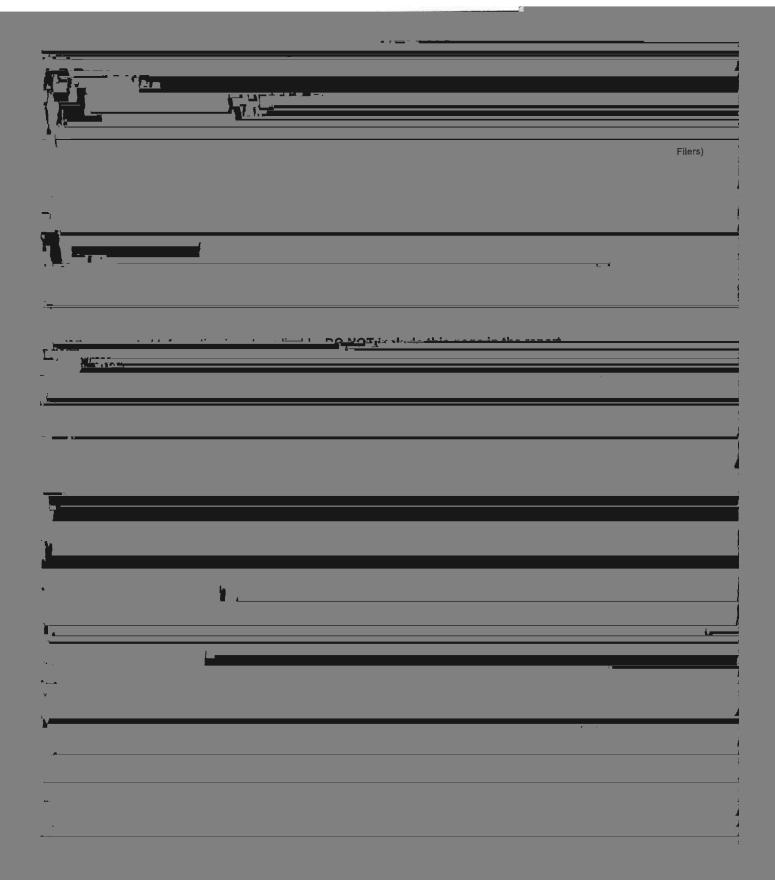
#### FORM C/OH COVER SHEET PG 2



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2 FILER NAME	Struction Guide explains in	on to complete time		3 Filer ID (Ethics Commission Filers)
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4 Date 5	Full name of contributor			7 Amount of contribution (\$)
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1 Total pages Schedule A1:

2 FILER NAME

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# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 If the requested information is not applicable, DO NOT include this page in the report. 3 Filer ID (Ethics Commission Filers) Stephenie O'Sell

## MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A1

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

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8 Principal occupation / Job title (See Instructions)  Reti	
Date Full name of contributor out-of-state PAC Amount of contribution (\$)  3/24/23 John Ratten Contributor address; City; State; Zip Code  700 N. McDonald TX 750  Prize Tal accuration (155) title (See Instructions)  (See Instructions)	
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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# POLITICAL EXPENDITURES MADE FROM POL TICAL CONTRIBUTIONS

## SCHEDULE F1

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## POLIT CAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not icable, DO NOT include this e in the

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Accounting/Banking	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Other (enter a category not listed above)
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

5 Payee

7 Payee address;

4 Date

6 Amount (\$)

#### SCHEDULE F1

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FROM POLITICAL CONTRIBUTIONS If the uested information is not \* le, DO NOT include this \* e in the report. ganlicah **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees F rage Loan Repayment/Reimbursement
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