CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR	TIMOTHY	МІ	OFFICE USE ONLY			
NAME	NICKNAME	SOTO	SUFFIX	Date Received 4/8/2022			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO BOX	APT / SUITE #; 5047 FRISCO	OTX 75035				
Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	(832)	918-6177	EXTENSION	Date Hand-delivered or Date Postmarked Receipt # Amount \$			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR	TIMOTHY	мі	Date Processed			
	NICKNAME	SOTO	SUFFIX	Date Imaged			
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SU	UITE #; CITY;	STATE; ZIP CODE			
TREASURER ADDRESS (Residence or Business)	РО ВОХ	5047 FRISC	O TX 75035				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
THONE	(832)	918-6177					
9 REPORT TYPE	January 15	X 30th day before e	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)			
	July 15	8th day before ele	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)			
10 PERIOD	Month	Day Year	Month	Day Year			
COVERED	1 /	/ 1 / 2022	THROUGH 4	/ 7 / 2022			
11 ELECTION	ELECTION DA Month Day	TE Primary	Runoff Other Description	E			
	5/7/	2022 General	Special				
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know FRISCO ISD BOAF	RD OF TRUSTEES PLACE 3			
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 COMSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
	COMMITTEE TYPE	COMMITTEE NAME					
Additional Pages	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 TIMOTHY SOTO			16 Filer ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	1	\$ O		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	,	\$ O		
	4. TOTAL POLITICAL EXPENDITURES	(\$ 0		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	ST DAY	\$ 0		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	F THE	\$ 0		
	wear, or affirm, under penalty of perjury, that the accompanying report is truquired to be reported by me under Title 15, Election Code.	e and corre	ct and includes all informati	on	
	Signature of Ca	andidate or	Officeholder	-	
	Please complete either option below	v:			
(1) Affidavit					
NOTARY STAMP/SEA	L				
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	Ti	itle of officer administering oat	– th	
	OR				
(2) Unsworn Declarati	on				
My name is	THY SOTO, and my date of birth is	01/0	5/1977		
My address is1019	, , , , , , , , , , , , , , , , , , , ,	·,	<u>5033 USA</u> .		
Executed in DEN	(city) (County, State of TX, on the 8TH day of APR (mont)	<u>IL</u> ,	p code) (country) 20_22. (year)		
	Signature of Candi	date/Officeho	older (Declarant)		