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)	Total pages filed: 2		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR MR	TIMOTHY	МІ	OFFICE USE ONLY		
NAME	NICKNAME	SOTO	SUFFIX	Date Received 5/2/2022		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	PO BOX	5047 FRISC	O TX 75035			
Change of Address		2110115 11111155	EVEE VOICE V			
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	MI	Date Processed		
	NICKNAME	SOTO	SUFFIX	Date Imaged		
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / S	UITE #; CITY;	STATE; ZIP CODE		
TREASURER ADDRESS (Residence or Business)	PO BOX	(5047 FRISC	O TX 75035			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(832) 918-6177					
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	X 8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day Year	Month	Day Year		
COVERED	4,	8 / 2022	THROUGH 4	/ 27 / 2022		
11 ELECTION	ELECTION DATE ELECTION TYPE					
	Month Day	Year Primary	Runoff Other Description			
	5⁄ 7	2022 General	Special			
12 OFFICE	OFFICE HELD (if any)	,	13 OFFICE SOUGHT (if known FRISCO ISD BOAR	D 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 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	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TR	EASURED ANNRESS			
		COMMITTEE CAMPAIGN TR	LAGUNEN ADDRESS			
GO TO PAGE 2						

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FORM C/OH COVER SHEET PG 2

15 C/OH NAME	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)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ O
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ O
	4. TOTAL POLITICAL EXPENDITURES	\$ O
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY \$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OLLAST DAY OF THE REPORTING PERIOD	\$ O
	wear, or affirm, under penalty of perjury, that the accompanying report is tru- quired to be reported by me under Title 15, Election Code.	and correct and includes all information
	Signature of Ca	ndidate or Officeholder
	Please complete either option below	<i>I</i> :
	·	
(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	Title of officer administering oath
	OR	
(2) Unsworn Declarati	on	
TIN 40	TIN (0 0 T 0	04/05/4077
My name is		01/05/1977
My address is 1019	COLLETON LN FRISCO	<u> 75033 USA</u>
D = 1 -		state) (zip code) (country)
Executed in DEN	ON County, State of TX , on the 1 day of MAY	
	(month	(year)
	Signature of Candid	date/Officeholder (Declarant)