CAMPAIGN FINANCE REPORT				FORM C/OH COVER SHEET PG 1		
The C/OH Instruction	The C/OH Instruction Guide explains how to complete this form.					
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	Jackson	OFFICE USE ONLY		
TW WIL	NICKNAME	LAST LOF	suffix ten	Date Received		
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX		CITY STATE: ZIP CODE WORLD TY 16133			
Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS/MRS/MR	Adde:	MI S LeD	Receipt # Amount S		
NAME	NICKNAME	LAST	CHICELA PER	Date Processed		
		Wi	lliam	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS	NO PO BOX PLEASE): APT / S	3	state; zip code		
8 CAMPAIGN TREASURER PHONE	AREA CODE (\$17) 7	733013	EXTENSION			
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before el	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	,	E E	THROUGH	r /		
11 ELECTION	ELECTION DA	ATE .	ELECTION TYPE			
	Month Day	Year Primary	Runoff Other Description			
	X 1	General	Special			
12 OFFICE	OFFICE HELD (if any)	*	13 OFFICE SOUGHT (if known)		
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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
001111111111111111111111111111111111111	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS			
		GO TO	PAGE 2			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

5 C/OH NAME		16 Filer ID (Ethics Com	mission Filers)
7 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBU- PLEDGES, LOANS, OR GUARANTEES OF L CONTRIBUTIONS MADE ELECTRONICALLY	OANS, OR	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUAR	RANTEES OF LOANS)	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDIT	JRE. \$	
	4. TOTAL POLITICAL EXPENDITURES	\$	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINT OF REPORTING PERIOD	AINED AS OF THE LAST DAY \$	7000
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTST LAST DAY OF THE REPORTING PERIOD	ANDING LOANS AS OF THE \$	
		Sphature of Candidate or Officeholde	er
	Please complete eith	er option below:	
(1) Affidavit NOTARY STAMP/SE/	Karen Robertson Notary Public State of Te: My Comm. Exp. 04/25/2 Notary ID 12998829-	kas 9	
	before me by Joy Jackson Loften	this the $\frac{29}{}$ day of $\frac{0}{}$	ipr:/
20 22 to certif	which, witness my hand and seal of office. **Butsan** Karen Roberts**	T111 - 6 661	Ex. Direct
Signature of officer adminis	ering oath Printed name of officer administ	ering oath	
(2) Unsworn Declara			
My name is		and my date of birth is	
My address is	(atroot)	(city) (state) (zip code)	(country)
Executed in	(street) County, State of, on the	, , , , , , , , , , , , , , , , , , ,	, ,,
	-	Signature of Candidate/Officeholder (De	clarant)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

		The Instruction Guide explains how to complete				
		Complete only if "Report Type" on page 1 is marke	d "Final Report" ••			
1	C/OH	H NAME	2 Filer ID (Ethics Commission Filers)			
3	SIGN	NATURE				
	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					
4		R WHO IS NOT AN OFFICEHOLDER				
	·· Con	omplete A & B below only if you are not an officeholder. •••				
	A.	CAMPAIGN FUNDS				
	Chec	eck only one:				
	\overline{V}	I do not have unexpended contributions or unexpended interest or income ea	rned from political contributions.			
		I have unexpended contributions or unexpended interest or income earned from may not convert unexpended political contributions or unexpended interest personal use. I also understand that I must file an annual report of unexpended contributions or unexpended interest or income earned on politic filing this final report. Further, I understand that I must dispose of unexpende interest or income earned on political contributions in accordance with the requirement.	or income earned on political contributions to ended contributions and that I may not retain all contributions longer than six years after d political contributions and unexpended			
	В.	ASSETS				
	Chec	ck only one:				
	\mathbb{Z}'	I do not retain assets purchased with political contributions or interest or othe	r income from political contributions.			
		I do retain assets purchased with political contributions or interest or other incident I may not convert assets purchased with political contributions or interest personal use. I also understand that I must dispose of assets purchased with requirements of Election Code, § 254.204.	or other income from political contributions to			
,		CEHOLDER Implete this section only if you are an officeholder ••				
		I am aware that I remain subject to filing requirements applicable to an officeholde file. I am also aware that I will be required to file reports of unexpended contribution of officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	tions if, after filing the last required report as ical contributions, or assets purchased with			
			Signature of Officeholder			

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