# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

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1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed:	OFFICE USE ONLY			
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST  NICKNAME LAST	SUFFIX	Date Received .			
4	ORIGINAL REPORT TYPE	July 15 Ex  30th day before election 15	cceeded \$500 limit Sith day after treasurer ppointment (officeholder only) anal report	OCC RECEIVED AT  Date Hand-delive of \$40 Prompted:00  Receipt # Amount \$			
5	ORIGINAL PERIOD COVERED	Month Day Year	Month Day Year THROUGH 10 10 10 10 10 10 10 10 10 10 10 10 10	Date Processed  Date Imaged			
6	EXPLANATION OF CO	RRECTION					
Needel to update form C/OH Cover Sheet pg 2							
7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.							
	,	Check	ONLY if applicable:				
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.						
	Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith  My Notary ID # 11133515  Expires August 30, 2020						
	AFFIX NOTARY STAT	MP / SEAL ABOVE	Signature of Candidate or C	Officeholder			
_	Swom to and subscribe	od before me, by the said <u>MISAE</u> which, witness my hand and seal of off	Ramos, this the	Htday of OCTOPER.  Title of officer administering oath			
Remember To Attach Any Part Of The Campaign Finance Report Form  Needed To Report And Explain Corrections							

## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

**Semiannual Reports:** Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected <u>before</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected <u>on or after</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

#### INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- 1. Filer ID. If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.
- 2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.
- **3. Candidate/Officeholder Name.** Put your full name here. Enter your name in the same way as on the report you are correcting.
- 4. Original Report Type. Mark the type of report you are correcting.

FFW!CIES ACUIL AR REPKA W Mally ID # 11133615 Transon Transon Transon Transon Transportant

- 5. Original Period Covered. Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.
- **6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.
- **7. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

## 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 FIRST  ///Skel  NICKNAME LAST	SUFFIX	OFFICE USE ONLY  Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address	ADDRESS / PO BOX; APT / SUITE #; C	STATE; ZIP CODE	OCC RECEIVED AT OCT 10'18 PM4:00			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (977 ) 849 - 4335	EXTENSION	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST  MISALL  NICKNAME LAST  RAMB	MI 	Receipt # Amount \$  Date Processed  Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SI	JITE #; CITY; STATE; AUTHN X	ZIP CODE 78727			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (972) \$41~4335	EXTENSION				
9 REPORT TYPE	January 15  30th day before e		15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year 08 / Z3 / Z0)8	Section of the sectio	Day Year 08 / Z 0 / 9			
11 ELECTION	Month Day Year Primary  11 / 06 / 2018 General	ELECTION TYPE  Runoff  Other  Osscription  Special	H WASHINGTON THE STATE OF THE S			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	City Council			
GO TO PAGE 2						

#### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM COOH COVER SHEET PG 2

1			15 Filer ID (Ethics Commission Filers)			
16 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				
GENERAL						
. · ·	SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME	4			
Additional Pages		,				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
		<u> </u>				
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH. ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 220			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED					
4. TOTAL POLITICAL EXPENDITURES  CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ \$ 6		\$ \$ 15.42.79				
			DAY \$ 220			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE DAY OF THE REPORTING PERIOD \$				
18 AFFIDAVIT						
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.						
FRANCES AGUILAR REPKA My Notary ID # 11133515 Signature of Candidate or Officeholder Expires August 30, 2020						
AFPIX NOTARY STAMP / SEALABOVE						
Sworn to and subscribed before me, by the said MISAE RAMOS, this the 10774 day of 10700, 2018, to certify which, witness my hand and seal of office.						
Frances Agular Repta notary						
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						