## 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)	2 Total pages filed: 2		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR Mrs.	FIRST Katherine	MI	OFFICE USE ONLY		
NAME	NICKNAME	LAST Sells	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX 2206 Landoi Lewisville, To	; APT / SUITE #; (	CITY; STATE; ZIP CODE	<b>Received</b> JUL <b>13</b> 2021		
Change of Address				Lyon / Court Of		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (972)	PHONE NUMBER 410-1144	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	. МІ	Receipt #   Amount \$		
NAME	Mrs. Jeanan			Date Processed		
	NICKNAME	Hamilton	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	2104 Heathe	(NO PO BOX PLEASE); APT / S er Ridge Court nd, Texas 75028	SUITE #; CITY;	STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	( 214 )	995-4707	EXTENSION			
9 REPORT TYPE	January 15  July 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)		
10 PERIOD			Reporting Limit	Language		
COVERED	Month 1	Day Year  1 21	THROUGH 6	Day Year 70 10 10 10 10 10 10 10 10 10 10 10 10 10		
11 ELECTION	Month Day  5 / 7	Year Primary  16 General	ELECTION TYPE  Runoff Other  Description  Special			
12 OFFICE	OFFICE HELD (if any) Lewisville ISI	D, Trustee Place 4	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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
OCIVIIVII I I LL(C)	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS			
	-	<b>GO TO</b>	PAGE 2			

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Katherine Sells		16 Filer ID (E	thics Commission Filers)			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		0.00			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00			
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	T DAY \$	4,410.16			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00			
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.     Code						
NOTARY STAMP/SEAL Sworn to and subscribed 20 21 to certify	before me by this the which, witness my hand and seal of office.	13 <sup>+L</sup> day	of July			
Signature of officer administer	ring oath Printed name of officer administering oath		f officer administering oath			
	OR					
(2) Unsworn Declaration	on					
My name is	, and my date of birth is _					
My address is	· · · · · · · · · · · · · · · · · · ·	,	,			
	•	ate) (zip co				
Executed in	County, State of , on the day of (month)	, 20	year)			
	Signature of Candida	ate/Officeholde	(Declarant)			