CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. MS / MRS / MR 3 CANDIDATE/ MI OFFICE USE ONLY **OFFICEHOLDER** MR **ERIC** J NAME Date Received NICKNAME LAST SUFFIX CANTU 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE OFFICEHOLDER P.O. BOX 60871 **MAILING** CORPUS CHRISTI, TX 78466 **ADDRESS** Change of Address AREA CODE PHONE NUMBER 5 CANDIDATE/ **EXTENSION** Date Hartyel Secretary marked **OFFICEHOLDER** (361 369-0539 PHONE Receipt # Ámount \$ MS / MRS / MR FIRST 6 CAMPAIGN MI **TREASURER GEORGE** MR Date Processed NAME NICKNAME LAST SUFFIX Date Imaged **EDWARDS** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN CITY: STATE: ZIP CODE **TREASURER** P.O. BOX 60871 **ADDRESS** CORPUS CHRISTI, TX 78466 (Residence or Business) AREA CODE PHONE NUMBER CAMPAIGN **EXTENSION TREASURER** PHONE (361 369-0539 9 REPORT TYPE 15th day after campaign 30th day before election Runoff January 15 treasurer appointment (Officeholder Only) July 15 8th day before election **Exceeded Modified** Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day Month Day Year Year COVERED / 23 12 / 31 / 23 1 **THROUGH** ELECTION DATE ELECTION TYPE 11 ELECTION Primary Runoff Other Description 5 General Special 24 OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE CITY COUNCIL DISTRICT 3 14 NOTICE FROM 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. **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME ERIC J CANTU		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) 	\$	0.00
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	0.00
18 SIGNATURE 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.			
Signature of Candidate or Officeholder			
Please complete either option below:			
	Control of the State of the Sta		
(1) Affidavit	ROSA MARIA GARZA Notary ID #133871274		
NOTARY STAMP/SEA	My Commission Expires		
Francisco de la constantina del constantina de la constantina de la constantina de la constantina del constantina de la constantina del constantina del constantina de la constantina de la constantina del constantina de			
Swom to and subscribed before me by <u>Eric J. Cantu</u> this the <u>18th</u> day of <u>December</u> ,			
20 24 to certify which, witness my hand and seal of office. Rosamaria Gartea Notary			
Signature of officer administe		Title of office	r administering oath
OR			
(2) Unsworn Declaration	on		
My name is, and my date of birth is			
	, and my date of birth is		
		tate) (zip code)	(country)
Executed in	County, State of, on the day of(month)	, 20	,
Signature of Candidate/Officeholder (Declarant)			