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 MI Paulette NICKNAME LAST SUFFIX Guajardo	OFFICE USE ONLY Date Received Date Filed 13 2022
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6409 Fumay Corpus Christi, TX 78414 AREA CODE PHONE NUMBER EXTENSION (361) 834-4125	Rebecca Huerta City Secretary Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Sallie NICKNAME LAST SUFFIX Ohmstede	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; 242 Circle Drive Corpus Christi, TX 78411	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 202-8132	
9 REPORT TYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month 07 / 01 / 2021 THROUGH 12 /	Day Year / 31 / 2021
11 ELECTION	Month Day Year Primary Runoff Other Description General Special	
12 OFFICE	OFFICE HELD (if any) Mayor 13 OFFICE SOUGHT (if know	n)
	GO TO PAGE 2	-

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Revised 9/8/2015



CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)		
	ILETTE GUAJ		15 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR N	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPEND DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE V INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT TH	VITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S		
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages	es				
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMI	s ITEMIZED		
	AND	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,550.00		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, S ITEMIZED	\$ ITEMIZED		
	4. TOTAL	POLITICAL EXPENDITURES	\$4,849.20		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LASTOCK PERIOD	\$ 6,065.35		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	\$ 59,050.00		
I swear, or affirm, under penalty of perjury, that the accompanying report is true and coxrect and includes all information required to be reported by me under Fittle 15, Election Code. Comm. Expires 07-10-2024 Notary ID 12029832 Signature of Candidate or Officeholder					
AFFIX NOTARY STAM		by the saidPAULETTE GUAJARDO	, this the5		
day of Lanua	<u>и</u> у, ₂₀ 22,	to certify which, witness my hand and seal of office).		
		Erika S. Villanueva	Notary Public		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
PAULETTE GUAJARDO	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$6,550.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$4,849.20
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	NDS \$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH \$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS \$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTED TO FILER	TIONS \$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to co	omplete this form. 1 Total pages Schedule A1: ITEMIZED
2 FILER NAME PAULETTE GUAJARDO	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor 🔲 o	ut-of-state PAC (ID#:) 7 Amount of contribution (\$)
6 Contributor address;	City; State; Zip Code
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date Full name of contributor 🔲 o	Amount of contribution (\$)
	City; State; Zip Code
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor 🔲 o	out-of-state PAC (ID#:) Amount of contribution (\$)
Contributor address;	City; State; Zip Code
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor	out-of-state PAC (ID#:) Amount of contribution (\$)
	City; State; Zip Code
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
	L COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

	P	401	ETTE	PAULETTE GUAJARDO CAMPAIGN	CAMP	AIG	N
2021			CONT	CONTRIBUTORS (SCHEDULE A1)	E 41)		
CONTRIBUTOR	AMOUNT	TN	DATE	ADDRESS	CITY	STATE	ZIP
Valero Political Action Committee	\$ 2	2,000.00	8/17/2021	P O Box 696000	San Antonio	XT	78269
Dan Leyendecker	\$ 1	1,000.00	8/17/2021	15222 Cane Harbor	CC	ΧT	78418
Bayfront Marina Investments	\$ 1	1,000.00	8/18/2021	707 North Shoreline Blvd	CC	ΧT	78413
Antonio Gomez III	\$	200.00	8/18/2021	4302 Woodsworth Creek	CC	Χ̈́	78410
JEHU Invesgtments LLC	\$	150.00	8/18/2021	5321 Sugar Creek Drive	CC	Ϋ́	78413
TRAQ Investments LLC	\$	200.00	9/2/2021	6518 Philmont Lake Drive	CC	Ϋ́	78414
Aransas-Corpus Christi Pilots PAC	\$ 2	2,000.00	10/18/2021	P O Box 2767	ည	Ϋ́	78403
	2						
Total to Date	\$ 6,55	6,550.00					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Th	ne Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A2: NONE
2 FILER NAME	PAULETTE GUAJARDO		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor)	8 Amount of . 9 In-kind contribution Contribution \$. description
	7 Contributor address; City; State; Zip Cod		
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law fir			n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of . In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Cod	de	; ;
Dring! !	unation / Joh title /EOD NON UIDIOIAL / O		Check if travel outside of Texas. Complete Schedule T.
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	
	ATTACH ADDITIONAL COPIES OF 1 contributor is out-of-state PAC, please see instruction		

PLEDGED CONTRIBUTIONS

SCHEDULE B

The	e Instruction Guide explains how to complete this	form.	1 Total pages Schedu NONE	ile B:
2 FILER NAME	PAULETTE GUAJARDO		3 Filer ID (Ethics Co	ommission Filers)
4 TOTAL O	F UNITEMIZED PLEDGES		\$	
5 Date	6 Full name of pledgor □ out-of-state PAC (ID#:)	8 Amount of Pledge \$. 9 In-kind contribution description
	7 Pledgor address; City; State; Zi			· · ·
				de of Texas. Complete Schedule T.
10 Principal occ	cupation / Job title (See Instructions)	11 Employer (See	Instructions)	
Date	Full name of pledgor		Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; Zi		i	
			Check if travel outside	· de of Texas. Complete Schedule T.
Principal occu	upation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of pledgor)	Amount of Pledge \$. In-kind contribution description
	Pledgor address; City; State; Z			·
			Check if travel outsi	de of Texas. Complete Schedule T.
Principal occ	cupation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of pledgor)	Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; Z			·
			Check if travel outsi	de of Texas. Complete Schedule T.
Principal occ	upation / Job title (See Instructions)	Employer (See	Instructions)	
If	ATTACH ADDITIONAL COPIES Of contributor is out-of-state PAC, please see instr			requirements.

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Revised 9/8/2015

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. NONE 3 Filer ID (Ethics Commission Filers) 2 FILER NAME PAULETTE GUAJARDO 4 TOTAL OF UNITEMIZED LOANS 7 Name of lender Date of loan out-of-state PAC (ID#:_ 9 Loan Amount (\$) 10 Interest rate 6 Is lender 8 Lender address; City; State; Zip Code a financial Institution? 11 Maturity date Ν 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) none **16** GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) INFORMATION 18 Guarantor address; City; State; Zip Code not applicable 21 Employer (See Instructions) 20 Principal Occupation (See Instructions) Date of loan Loan Amount (\$) Name of lender out-of-state PAC (ID#:__ Interest rate Is lender City; Lender address: State: Zip Code a financial Institution? Maturity date Principal occupation / Job title (See Instructions) Employer (See Instructions) Check if personal funds were deposited into political Description of Collateral account (See Instructions) none Name of guarantor Amount Guaranteed (\$) GUARANTOR INFORMATION Guarantor address; City; State; Zip Code not applicable Principal Occupation (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Printing Expense Salaries/Wages/Contract Labor S how to complete this form.	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME PAULETTE GUA	AJARDO	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name ITEMIZED		
6 Amount (\$)	7 Payee address; City; State; Zi	p Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so	Check if travel of	outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zi	p Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s	Check if travel of	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Z	ip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s	Check if travel	outside of Texas. Complete Schedule T. in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS NE	EEDED

Colored Colo	2021		I	PAUL	PAULETTE GUAJARDO CAMPAIGN	CAMPAIGN
Sylenomy DATE Suite \$ 25.58 7/2/2021 Campaign Experiments Space \$ 25.35 7/6/2021 Campaign Experiments Space \$ 28.15 7/14/2021 Campaign Experiments In Bank \$ 20.00 7/30/2021 Campaign Experiments Space \$ 25.17 8/2/2021 Campaign Experiments Space \$ 25.17 8/2/2021 Campaign Experiments Space \$ 28.15 8/2/2021 Campaign Experiments Space \$ 28.15 8/2/2021 Campaign Experiments Space \$ 20.00 8/31/2021 Campaign Experiments Space \$ 25.58 8/2/2021 Campaign Experiments Space \$ 25.58 9/2/2021 Campaign Experiments Space \$ 25.15 9/2/2021 Campaign Experiments Space \$ 25.15 10/4/2021 Campaign Experiments Space \$ 25.15 10/4/2021 Campaign Experiments Space \$ 25.15 10/29/2021 Campaign Experims <t< th=""><th>7707</th><th></th><th></th><th></th><th>VENDOR EXPENSES (SCHEDULE F1)</th><th>LE F1)</th></t<>	7707				VENDOR EXPENSES (SCHEDULE F1)	LE F1)
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Space \$ 25.35 7/6/2021 Space \$ 25.35 7/6/2021 In Bank \$ 20.00 7/30/2021 Suite \$ 25.17 8/2/2021 Suite \$ 25.17 8/2/2021 Suite \$ 25.18 9/2/2021 Suite \$ 25.18 10/4/2021 In Bank \$ 1.75 9/30/2021 In Bank \$ 1.75 10/29/2021 In Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021						
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Suite \$ 25.17 8/2/2021 Suite \$ 25.58 8/2/2021 Space \$ 28.15 8/16/2021 ess \$ 305.82 8/20/2021 In Bank \$ 20.00 8/31/2021 Suite \$ 25.58 9/2/2021 Space \$ 28.15 9/2/2021 Space \$ 28.15 9/14/2021 In Bank \$ 1,000.00 9/15/2021 In Bank \$ 1,000.00 10/15/2021 In Bank \$ 25.15 10/4/2021 In Bank \$ 1,000.00 10/15/2021 In Bank \$ 1,000.00 10/15/2021 In Bank \$ 20.00 10/15/2021 In Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.68 11/2/2021 Suite \$ 25.68 11/2/2021 Suite \$ 25.68 11/2/2021 Suite \$ 25.68 11/2/2021	American Bank	\$	1.75	7/30/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
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ess \$ 305.82 8/20/2021 in Bank \$ 20.00 8/31/2021 Suite \$ 25.58 9/2/2021 Space \$ 28.15 9/14/2021 space \$ 25.15 9/14/2021 rs & Walkers \$ 1,000.00 9/15/2021 rs & Walkers \$ 1,000.00 9/15/2021 suite \$ 25.15 10/4/2021 rs & Walkers \$ 1,000.00 10/14/2021 rs & Walkers \$ 1,000.00 10/15/2021 rs & Walkers \$ 1,000.00 10/15/2021 n Bank \$ 20.00 10/29/2021 n Bank \$ 1.75 10/29/2021 suite \$ 25.58 11/2/2021 suite \$ 24.84 11/2/2021	Square Space	\$	28.15	8/16/2021	Campaign Expense - Email Account	New York, NY
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Suite \$ 1.75 8/31/2021 Suite \$ 25.58 9/2/2021 Space \$ 28.15 9/2/2021 Space \$ 28.15 9/14/2021 In Bank \$ 1,000.00 9/15/2021 Suite \$ 28.15 10/4/2021 In Bank \$ 1,000.00 10/15/2021 In Bank \$ 20.00 10/29/2021 In Bank \$ 20.00 10/29/2021 In Bank \$ 20.00 10/29/2021 Suite \$ 25.58 11/2/2021 In Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021	American Bank	❖	20.00	8/31/2021	Campaign Expense - Bank Maintenance Fee	P O Box 6469, CCTX 78466
Suite \$ 25.58 9/2/2021 Space \$ 25.15 9/2/2021 rs & Walkers \$ 1,000.00 9/15/2021 rn Bank \$ 1,75 9/30/2021 suite \$ 25.15 10/4/2021 space \$ 25.15 10/4/2021 space \$ 25.58 10/14/2021 rs & Walkers \$ 1,000.00 10/15/2021 rn Bank \$ 20.00 10/29/2021 suite \$ 25.58 11/2/2021 suite \$ 25.58 11/2/2021 spaire \$ 24.84 11/2/2021	American Bank	\$	1.75	8/31/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
Space \$ 25.15 9/2/2021 rs & Walkers \$ 1,000.00 9/15/2021 rn Bank \$ 1,75 9/30/2021 Suite \$ 25.15 10/4/2021 space \$ 25.58 10/4/2021 rs & Walkers \$ 28.15 10/14/2021 rs & Walkers \$ 10/14/2021 rn Bank \$ 10/29/2021 suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 s 25.58 11/2/2021	Google Suite	❖	25.58	9/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
Space \$ 28.15 9/14/2021 rs & Walkers \$ 1,000.00 9/15/2021 in Bank \$ 25.15 10/4/2021 Suite \$ 25.58 10/4/2021 rs & Walkers \$ 1,000.00 10/14/2021 rs & Walkers \$ 1,000.00 10/15/2021 in Bank \$ 20.00 10/29/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	Google	\$	25.15	9/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
rs & Walkers \$ 1,000.00 9/15/2021 In Bank \$ 1.75 9/30/2021 Suite \$ 25.15 10/4/2021 Space \$ 28.15 10/4/2021 Irs & Walkers \$ 1,000.00 10/15/2021 In Bank \$ 20.00 10/29/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021	Square Space	\$	28.15	9/14/2021	Campaign Expense - Email Account	New York, NY
In Bank \$ 1.75 9/30/2021 Suite \$ 25.15 10/4/2021 Space \$ 25.58 10/4/2021 In Sank \$ 1,000.00 10/14/2021 In Bank \$ 20.00 10/29/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021 Suite \$ 25.58 11/2/2021	Dreamers & Walkers	\$	1,000.00	9/15/2021	Campaign Expense - Political Consulting	622 Bermuda, CCTX 78411
Suite \$ 25.15 10/4/2021 Space \$ 25.58 10/4/2021 rs & Walkers \$ 28.15 10/14/2021 in Bank \$ 1,000.00 10/15/2021 in Bank \$ 20.00 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	American Bank	\$	1.75	9/30/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
Suite \$ 25.58 10/4/2021 Space \$ 28.15 10/14/2021 rrs & Walkers \$ 1,000.00 10/15/2021 an Bank \$ 20.00 10/29/2021 suite \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	Google	\$	25.15	10/4/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
Space \$ 28.15 10/14/2021 rrs & Walkers \$ 1,000.00 10/15/2021 an Bank \$ 20.00 10/29/2021 an Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	Google Suite	\$	25.58	10/4/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
In Bank \$ 1,000.00 10/15/2021 In Bank \$ 20.00 10/29/2021 In Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	Square Space	\$	28.15	10/14/2021	Campaign Expense - Email Account	New York, NY
an Bank \$ 20.00 10/29/2021 an Bank \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	Dreamers & Walkers	\$	1,000.00	10/15/2021	Campaign Expense - Political Consulting	622 Bermuda, CCTX 78411
Suite \$ 1.75 10/29/2021 Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	American Bank	\$	20.00	10/29/2021	Campaign Expense - Bank Maintenance Fee	P O Box 6469, CCTX 78466
Suite \$ 25.58 11/2/2021 \$ 24.84 11/2/2021	American Bank	\$	1.75	10/29/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
\$ 24.84 11/2/2021	Google Suite	\$	25.58	11/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
12.00	Google	\$	24.84	11/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
\$ 28.15 11/15/2021	Square Space	\$	28.15	11/15/2021	Campaign Expense - Email Account	New York, NY

		Committee of the party of the p	Commence of the Commence of th		
Dreamers & Walkers	₩	2,000.00	2,000.00 11/22/2021	Campaign Expense - Political Consulting	622 Bermuda, CCTX 78411
American Bank	₩	1.75	1.75 11/30/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
Google Suite	₩	25.58	25.58 12/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
Google	45	24.84	12/2/2021	Campaign Expense - Email Account	1600 Amphitheatre Pkwy, Mountain View, CA 94043
Square Space	w	28.15	28.15 12/15/2021	Campaign Expense - Email Account	New York, NY
American Bank	₹.	1.75	1.75 12/30/2021	Campaign Expense - Bank Paper Fee	P O Box 6469, CCTX 78466
Total to Date	S	4,849.20			

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political		Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel In District Travel Out Of District Other (enter a category not listed above)	
	The Instruction Guide explain	ns how to complete this form.		
1 Total pages Schedule F2:	2 FILER NAME PAULETTE GU	JAJARDO	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEM	IIZED UNPAID INCURRED OBLI	GATIONS	\$ -0-	
5 Date	6 Payee name			
7 Amount (\$)	8 Payee address; City; State;	Zip Code		
9 TYPE OF EXPENDITURE	Political	Non-Political		
10	(a) Category (See Categories listed at the top of the	is schedule) (b) Description	on	
PURPOSE OF		Check	f travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check	if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address; City; State;	Zip Code	:	
TYPE OF EXPENDITURE	Political	Non-Political		
	Category (See Categories listed at the top of the			
PURPOSE OF			if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Cneck	if Austin, TX, officeholder living expense	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS N	EEDED	

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

TI	ne Instruction Guide explains how to complete this form.	1 Total pa	ges Schedule F3: NONE
2 FILER NAME	PAULETTE GUAJARDO	3 Filer ID	(Ethics Commission Filers)
4 Date	5 Name of person from whom investment is purchased		
	6 Address of person from whom investment is purchased; City	 /;	State; Zip Code
	7 Description of investment		
	8 Amount of investment (\$)		
Date	Name of person from whom investment is purchased		
	Address of person from whom investment is purchased; City	 ⁄;	State; Zip Code
	Description of investment		
	Amount of investment (\$)		
	1		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULI	E AS NEEC	DED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F4:	2 FILER NAME PAULETTE GUAJARDO 3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CREDIT CARD \$ -0-
5 Date	6 Payee name
7 Amount (\$)	8 Payee address; City; State; Zip Code
9 TYPE OF EXPENDITURE	Political Non-Political
10	(a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE	Check if travel outside of Texas. Complete Schedule T.
OF Expenditure	Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held H
Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code
TYPE OF EXPENDITURE	Political Non-Political
	Category (See Categories listed at the top of this schedule) Description
PURPOSE	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking
Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Contributions/Donations Made I Candidate/Officeholder/Politic		Gift/Awards/Memorials Expense Legal Services	Printing Expense Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
redit Card Payment		The Instruction Guide explai	ns how to complete this form.	
Total pages Schedule G:	2 FILER NAM	PAULETTE GL	JAJARDO	3 Filer ID (Ethics Commission Filers)
Date	5 Payee name	• NONE		
Amount (\$)	7 Payee addr	ress; City; State; Z	ip Code	
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	(a) Category (S	see Categories listed at the top of this so	Check if travel ou	tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		te / Officeholder name	Office sought	Office held
Date	Payee nam	e		
Amount (\$)	Payee add	ress; City; State; Z	ip Code	
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (S	See Categories listed at the top of this s	Check if travel ou	ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/		ate / Officeholder name	Office sought	Office held
Date	Payee nam	ne		
Amount (\$)	Payee add	lress; City; State; Z	Zip Code	
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s	Check if travel or	ulside of Texas. Complete Schedule T. n, TX, officeholder living expense
	L Candida	ate / Officeholder name	Office sought	Office held

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gilft/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Candidate/Officeholder/Politi		Legal Service	s		/Wages/Contract Labor	Other (enter a cate	egory not listed above)
Credit Card Payment		The Instru	ction Guide expl	lains how to	complete this form.		
1 Total pages Schedule H:	2 FILER NA		AULETTE (GUAJAI	RDO	3 Filer ID (Eth	ics Commission Filers)
4 Date	5 Business	name No	ONE				
6 Amount (\$)	7 Business	address;	City; State;	Zip Code	-		
8 PURPOSE OF EXPENDITURE	(a) Category	(See Categories	s listed at the top of th	is schedule) (Check if travel outside	e of Texas. Complete Sche (, officeholder living exp	
9 Complete ONLY if direct expenditure to benefit C/C		ate / Officeh	older name	-	Office sought		Office held
Date	Business	name					
Amount (\$)	Business	address;	City; State;	Zip Code			
PURPOSE OF EXPENDITURE	Category	(See Categorie	s listed at the top of th	is schedule)	\Box	e of Texas. Complete Sche K, officeholder living ex	
Complete ONLY if direct expenditure to benefit C/C		ate / Officeh	older name	L	Office sought		Office held
Date	Business	name					
Amount (\$)	Business	address;	City; State;	Zip Code			
PURPOSE OF EXPENDITURE	Category	(See Categorie	s listed at the top of th	nis schedule)		e of Texas. Complete Sche X, officeholder living ex	
Complete <u>ONLY</u> if direct expenditure to benefit C/C		ate / Officeh	older name		Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I:	2 FILER NAME PAULETTE GUAJARDO	3 Filer ID (Ethics Commission Filers)			
4 Date	5 Payee name NONE				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)			

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	le K:				
2 FILER NA	PAULETTE GUAJARDO	3 Filer ID (Ethics C	Commission Filers)		
4 Date	5 Name of person from whom amount is received	ε	3 Amount (\$)		
	6 Address of person from whom amount is received; City; State;	Zip Code			
	7 Purpose for which amount is received Check if	political contribution re	eturned to filer		
Date	Name of person from whom amount is received		Amount (\$)		
	Address of person from whom amount is received; City; State				
	Purpose for which amount is received Check if	political contribution re	eturned to filer		
Date	Name of person from whom amount is received		Amount (\$)		
	Address of person from whom amount is received; City; State;	Zip Code			
	Purpose for which amount is received Check if	political contribution re	eturned to filer		
Date	Name of person from whom amount is received		Amount (\$)		
	Address of person from whom amount is received; City; State	; Zip Code			
	Purpose for which amount is received Check if	political contribution re	eturned to filer		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.				1 Total pages Schedule T:		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
4 Name of Contributor /	4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee					
5 Contribution / Expend	iture reported on:					
Schedule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1		
Schedule F2	Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B-					
6 Dates of travel	of travel 7 Name of person(s) traveling					
	8 Departure city or name of departure location					
	9 Destination city or name of destination location					
10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)						
Name of Contributor /	Name of Contributor / Corporation or Labor Organization / Pledgor / Payee					
Contribution / Expend	liture reported on:					
Schedule A2	Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1		
Schedule F2	Schedule F	4 Schedule G	Schedule H	Schedule COH-UC Schedule B-SS		
Dates of travel	s of travel Name of person(s) traveling					
	Departure city or name of departure location					
	Destination city or name of destination location					
Means of transportation Purpose of travel (including name of conference, seminar, or other event)						
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee						
Contribution / Fun	lituro roporto-l					
Contribution / Expend	Schedule B	Па <u>-</u>	Па			
		Schedule B(J)	Schedule C2	☐ Schedule D ☐ Schedule F1		
Schedule F2 Dates of travel	Schedule F		Schedule H	Schedule COH-UC Schedule B-SS		
	- Property and a second					
	Departure city or name of departure location					
	Destination city	or name of destination lo	ocation			
Means of transportation Purpose of travel (including name of conference, seminar,			seminar, or other event)			
	ATTACH	ADDITIONAL COPIES	OF THIS SCHEDUL	E AS NEEDED		

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form. · Complete only if "Report Type" on page 1 is marked "Final Report" · 2 Filer ID (Ethics Commission Filers) 1 C/OH NAME **3 SIGNATURE** 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. Signature of Candidate / Officeholder FILER WHO IS NOT AN OFFICEHOLDER · Complete A & B below only if you are not an officeholder. · A. **CAMPAIGN FUNDS** Check only one: I do not have unexpended contributions or unexpended interest or income earned from political contributions. I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. B. **ASSETS** Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Signature of Candidate **OFFICEHOLDER** · Complete this section only if you are an officeholder · I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions. Signature of Officeholder