## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

| 15 C/OH NAME   |                                    |   |  | 16 Filer I  | D (Ethics Com                        | mission Filers)          |
|--|------------------------------------|---|--|-------------|--------------------------------------|--------------------------|
| 17 CONTRIBUTION<br>TOTALS  | PLEDG                              | UNITEMIZED POLITICAL CONT<br>GES, LOANS, OR GUARANTEES<br>RIBUTIONS MADE ELECTRONIC | OF LOANS, OR   |             | \$ <b>(</b>                          | $\bigcirc$               |
|  |                                    | POLITICAL CONTRIBUTION  |  |             | \$                                   | $\bigcirc$               |
| EXPENDITURE<br>TOTALS  | 3. TOTAL                           | UNITEMIZED POLITICAL EXPEN  | NDITURE.   |             | \$ (                                 | $\overline{\mathcal{C}}$ |
|  | 4. TOTAL                           | POLITICAL EXPENDITURES  | i  |             | \$                                   | 0                        |
| CONTRIBUTION<br>BALANCE  |                                    | POLITICAL CONTRIBUTIONS MA  | AINTAINED AS OF THE LAS                              | ST DAY      | \$                                   | $\bigcirc$               |
| OUTSTANDING<br>LOAN TOTALS   |                                    | PRINCIPAL AMOUNT OF ALL OU<br>AY OF THE REPORTING PERIC                             |  | THE         | \$ (                                 | )                        |
| Signature of Candidate or Officeholder  Please complete either option below: |                                    |   |  |             |                                      |                          |
| (1) Affidavit  |                                    |   |  |             |                                      |                          |
| NOTARY STAMP/SEA   | L                                  |   |  |             |                                      |                          |
| Sworn to and subscribed  |                                    |   | this the _   |             | day of                               | ,                        |
| 20, to certify   | which, witness my h                | and and seal of office.   |  |             |                                      |                          |
| Signature of officer administer  | ering oath                         | Printed name of officer admir   | nistering oath                                       |             | Title of officer a                   | dministering oath        |
|  |                                    | OR  |  |             |                                      |                          |
| My name is  My address is  Executed in                                       | On<br>JCV<br>(street)<br>County, S |   | , and my date of birth is city)  (city)  (a)  (city) |             | 23/-<br>7(254)<br>zip code)<br>20/25 | 77<br>ZUSKO<br>(country) |
|  | <u> </u>                           |   | Signature of Candid                                  | late/Office | (year)<br>holder (Declar             | ant)                     |