## 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. 3 CANDIDATE / MS / MRS / MR MI OFFICE USE ONLY **OFFICEHOLDER** Mr Rober Ε NAME Date Received LAST NICKNAME SHEEK Blake .Jr ZIP CODE 4 CANDIDATE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: **OFFICEHOLDER** 1158 West Pioneer Parkway Arlingotn TX 76013 MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (972 3657010 PHONE Receipt # Amount \$ MS / MRS / MR FIRST МІ 6 CAMPAIGN **TREASURER** Corey N Mr Date Processed NAME LAST NICKNAME SUFFIX Date Imaged Callaway STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: CAMPAIGN STATE: ZIP CODE **TREASURER** 201 South Center Suite 420 Arlington TX 76010 **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER EXTENSION 8 CAMPAIGN **TREASURER PHONE** 2744877 (817 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Dav Year Month Day Year COVERED 4 24 1 24 1 **THROUGH** ELECTION TYPE **ELECTION DATE** 11 ELECTION Primary Other Month Dav Year Description n/a General Special OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) 12 OFFICE n/a Inone 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. 14 NOTICE FROM **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** 

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Revised 1/1/2024

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer	ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHE PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	R THAN	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF L	LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$
	4. TOTAL POLITICAL EXPENDITURES		\$
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF TO TO THE REPORTING PERIOD	THE LAST DAY	\$ 1033.01
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOAN LAST DAY OF THE REPORTING PERIOD	S AS OF THE	\$ 5550.00
	wear, or affirm, under penalty of perjury, that the accompanying reportance to be reported by me under Title 15, Election Code.	rt is true and cor	rect and includes all information
Signature of Candidate or Officeholder			
Please complete either option below:			
r ieuse semplete statel spaen selem			
(1) Affidavit			
NOTARY STAMP/SEA	L		
Sworn to and subscribed before me by this the day of,			
20, to certify	which, witness my hand and seal of office.		
Signature of officer administer	ring oath Printed name of officer administering oath		Title of officer administering oath
	OR		
(2) Unsworn Declarati	on		
My name is Robert Bl	ake, and my date of	birth is 12-07	-1970
	est Pioneer Parkway Arlington		6012 , US
Executed in Tarrant	(street) (city) County, State of TX , on the 4th day of	(state) April	(zip code) (country) . 2024 . (vear)
	Signature o	f Candidate/Office	eholder (Declarant)
Forms provided by Texas Et	hics Comm Reset Form s.sta Reset F	Page	Revised 1/1/2024