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:			
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	Flan		MI		USE ONLY
NAME	NICKNAME	Thores		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 14841 Ste 53	N. Dullas Pk	erry; stat wy y Tx)	5254		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (214)	PHONE NUMBER 866 - 000		NSION		or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR	Pirst		MI	Receipt #	Amount \$
NAME	NICKNAME SAST SUFFIX			Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	1	O PO BOX PLEASE); APT/SI		174; 75254	STATE;	ZIP CODE
(Residence or Business)		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	0017			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTE	NSION		
9 REPORT TYPE	January 15	30th day before e	lection	Runoff	15th day aft treasurer ap (Officeholde	
	July 15	8th day before ele	CHOH [Exceeded Modified Reporting Limit	Final Repor	t (Attach C/OH - FR)
10 PERIOD COVERED	Month 7	Day Year / 15 / 22	THROUGH	Month	Day Year / 15 / 23	
11 ELECTION	ELECTION DATE Month Day Year Primary Runoff Other Description General Special					
12 OFFICE	OFFICE HELD ("any) Dallas ISD Trustee 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 OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME			
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS			
GO TO PAGE 2						

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 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0				
	4. TOTAL POLITICAL EXPENDITURES	s ()				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE \$				
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.						
	91/10	ha				
	Signature of Co	ndidate or Officeholder				
	Signature of Ca	indicate of Officerolder				
Please complete either option below:						
8	anillin.					
	CYNTHIA MINCHILLO					
(1) Affidavit	My Notary ID # 3945501					
(1) randavic	Expires May 27, 2024					
•						
NOTARY STAMP/SEAL						
Sworn to and subscribed before me by Edwin S. Flores this the 16th day of January.						
20 _ 23 _, to certify which, witness my hand and seal of office.						
(1)	20 Canthia Minehillo	Notary Public				
Signature of officer administe	ring oath Printed name of officer administering oath	Title of office administering oath				
A LOS CHARLES	OR OR					
(2) Unsworn Declarati	on					
My name is	, and my date of birth is					
My address is						
	(street) (city) (s	state) (zip code) (country)				
Executed in	County, State of, on the day of(month	, 20				
	(month	, 20				
	Signature of Candid	date/Officeholder (Declarant)				