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: 4

OFFICE USE ONLY

Date Received

RECEIVED BOARD SERVICES DALLAS ISD 2026 JUL 15 A 7:55

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: (MR) | FIRST: Dan | MI:

NICKNAME | LAST: Micciche | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX: 1140 Bally Mote Drive | APT / SUITE #: | CITY: Dallas | STATE: TX | ZIP CODE: 75218

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (214) | PHONE NUMBER: 321-3230 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR | FIRST: Sara | MI:

NICKNAME | LAST: Wahl | SUFFIX

7 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): 6434 Malcomb Drive | APT / SUITE #: | CITY: Dallas | STATE: TX | ZIP CODE: 75214

8 CAMPAIGN TREASURER PHONE

AREA CODE: (214) | PHONE NUMBER: 575-1887 | EXTENSION:

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)

☒ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month: 1 | Day: 1 | Year: 26 THROUGH Month: 6 | Day: 30 | Year: 26

11 ELECTION

ELECTION DATE: Month: 5 | Day: 4 | Year: 24

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ Other Description: uncontested ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any): Trustee Dallas ISD D-3

13 OFFICE SOUGHT (if known): Trustee Dallas ISD D-3

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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

☐ Additional Pages

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

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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	1.	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**	$ 0
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 37,110.82
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 34,000.00

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:

(1) Affidavit

NOTARY STAMP / SEAL

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 administering oath | Printed name of officer administering oath | Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Dan Micciche, and my date of birth is [redacted]

My address is 1140 Bally Mote Drive (street) Dallas (city) Tx (state) 75218 (zip code) _____ (country)

Executed in Dallas County, State of Tx, on the 14th day of July (month), 20 26 (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1	☐	SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS	$
2.	☐	SCHEDULE A2 NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3	☐	SCHEDULE B PLEDGED CONTRIBUTIONS	$
4	☐	SCHEDULE E LOANS	$ 34,000
5.	☐	SCHEDULE F1 POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
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 FUNDS	$
10	☐	SCHEDULE H PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.	☐	SCHEDULE I NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12	☐	SCHEDULE K INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

LOANS

SCHEDULE E

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form

1 Total pages Schedule E: 1

2 FILER NAME: Dan Micciche

3 Filer ID (Ethics Commission Filers):

4 TOTAL OF UNITEMIZED LOANS: $

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5 Date of loan: 2/27/12

6 Is lender a financial institution? Y N

7 Name of lender: Daniel J. Micciche ☐ out-of-state PAC (ID#)

8 Lender address, City, State, Zip Code: 1140 Bally Mote Drive, Dallas TX 75218

9 Loan Amount ($): $ 9,000

10 Interest rate:

11 Maturity date: 3/15/2030

12 Principal occupation / Job title (See Instructions): attorney

13 Employer (See Instructions):

14 Description of Collateral ☐ none

15 ☐ Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor: N/A

18 Guarantor address, City, State, Zip Code:

19 Amount Guaranteed ($):

20 Principal Occupation (See Instructions):

21 Employer (See Instructions):

Date of loan: 7/14/23

Is lender a financial institution? Y N

Name of lender: Daniel J. Micciche ☐ out-of-state PAC (ID#)

Lender address, City, State, Zip Code: 1140 Bally Mote Drive, Dallas TX 75218

Loan Amount ($): $ 25,000

Interest rate:

Maturity date: 3/15/2030

Principal occupation / Job title (See Instructions): attorney

Employer (See Instructions):

Description of Collateral ☐ none

☐ Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor: N/A

Guarantor address, City, State, Zip Code:

Amount Guaranteed ($):

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.