CAMPAIC	ATE / OFI	FICEHOLDER ICE REPORT		FORM C/OH COVER SHEET PG
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	Dlanga	MI	OFFICE USE ONLY
	NICKNAME .	Atkinso	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO B	OX; APT / SUITE #; C	STATE; ZIP CODE	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION FILED	Date Hand-delivered or Date Postmarked 1-3 A.D. 202
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	Planca	DONNA M	IVE CAK COUNTY TEXAS S 1. WANWAY GLERK, COUNTY COURT LE TANK DEPUTY
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / SUI	AT L	15 0'CLOCK PM
TREASURER ADDRESS (Residence or Business)	O High I have you	(NU PU BUA PLEASE); AFT FOUL	TE#; CITY;	STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15	30th day before elec	ction Runoff	15th day after campaign treasurer appointment (Officeholder Only)
10 PERIOD	July 15	8th day before election	Reporting Limit	Final Report (Attach C/OH - FR)
COVERED	Month	Day Year	Month THROUGH	Day Year
11 ELECTION	Month Day	Year Primary	ELECTION TYPE Runoff Other Description Special	
2 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)	
	TAX ASSI	essor Collecto		covertor
4 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE THE CANDIDATE / OFFICE	E OF POLITICAL CONTRIBUTIONS ACC	CEPTED OR POLITICAL EXPENDITURES MADI	E BY POLITICAL COMMITTEES TO SUPPORT ATE'S OR OFFICEHOLDER'S KNOWLEDGE OR Y RECEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASU	IDEO NAME	
	SPECIFIC	COMMITTEE CAMPAIGN TREASI		
<u> </u>		GO TO PA	 AGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

	THANCE REPORT		COVER SHEET PG
15 C/OH NAME		16	Filer ID (Ethics Commission Filer
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL C PLEDGES, LOANS, OR GUARANTI CONTRIBUTIONS MADE ELECTRO	EER OF LOAMO OR	\$
	2. TOTAL POLITICAL CONTRIBUT (OTHER THAN PLEDGES, LOANS,	IONS	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EX	PENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITUR	RES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LAST DA	Y \$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL LAST DAY OF THE REPORTING PE	OUTSTANDING LOANS AS OF THE	\$
SIGNATURE I swe	ear, or affirm, under penalty of perjury, that the red to be reported by me under Title 15, Election	e accompanying report is true and n Code.	correct and includes all informa
	\subseteq	Deange Albe	
		Signature of Candidate	e or Officeholder
Afficavit Notary Pu	L. ARMSTRONG Dic, State of Texas		
Comm. E	xpires 09-20-2025 ID 123988809		
orn to and subscribed bei	ore me by Deanna MKinson	this the	rd day of January
24 to certify whi	ch, witness my hand and seal of office.	1	0/0
ature of officer administering		7FWS FON9 Inistering oath	Title of officer administering oa
	OR		·
Unsworn Declaration			
name is		and my date of hirth is	
iddress is			
	(street)	(city) (state)	(zip code) (country)
uted in	County, State of, on t	he day of (month)	, 20 (year)
÷			
		Signature of Candidate/Offic	ceholder (Declarant)