CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT				FORM C/OH COVER SHEET PG 1
The C/OH Instruction	Guide explains how	v to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: . J
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR	FIRST	MI	OFFICE USE ONLY
NAME	Mr.,	Jaime LAST Viteri	SUFFIX	Pate Received RCVD NOVO5 2
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX, APT / SUITE #; CITY, STATE; ZIP CODE 63 Firefall Ct., Spring, TX 77380			PM03:19:462024
OFFICEHOLDER PHONE	( 312 )	PHONE NUMBER 547-9121	EXTENSION	Date Hand-derivered or Date Pastmerked YEO'A VIA LIMAT 255pt Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR Mrs.	FIRST	MI	
	NICKNAME	Camille	SUFFIX	Date Processed
		McDougald		Date Imaged
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; ZIP CODE  63 Firefall Ct., Spring, TX 77380			
CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (678 ) 595-8973			
REPORT TYPE	January 15	30th day before el	ection Exceeded Modified	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
0 PERIOD COVERED	Month 9	Day Year / 24 / 2024	Reporting Limit  Month  THROUGH 10	Day Year /27 / 2024
1 ELECTION	ELECTION DATE  Month Day Year Primary Runoff Other Description  11 / 5 / 2024 General Special			
2 OFFICE	None 13 OFFICE SOUGHT (if known) The Woodlands Township Board - Position 4			
Additional Pages	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		C. Laurika Maria
	GENERAL SPECIFIC	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME		

## CANDIDATE / OFFICEHOLDER FORM C/OH **COVER SHEET PG 2 CAMPAIGN FINANCE REPORT** 15 C/OH NAME 16 Filer ID (Ethics Commission Filers) 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTALS 2. TOTAL POLITICAL CONTRIBUTIONS \$0 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3 TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ TOTALS **TOTAL POLITICAL EXPENDITURES** CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD OUTSTANDING 6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code. - Jan Urtus Signature of Candidate or Officeholder Please complete either option below: NHI LE WHITEHEAD (1) Affidavit Notary Public, State of Texas Comm. Expires 06-18-2025 Notary ID 124981671 NOTARY STAMP/SEAL this the 5th day of November. Sworn to and subscribed before me by \_ to certify which, witness my hand and seal of office. Nhi Whitehead Printed name of officer administering oath (2) Unsworn Declaration My name is \_\_\_, and my date of birth is \_\_ My address is \_\_\_\_ (city) (state) (zip code) (country) (street) County, State of \_\_\_\_\_, on the \_\_\_\_\_day of \_\_\_\_\_(month) Signature of Candidate/Officeholder (Declarant)