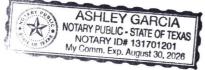
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MRS ASHLEY	MI	OFFICE USE ONLY	
	NICKNAME LAST HERNANDEZ	SUFFIX	Date Receive ECTO	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 32 SWANSON RD VICTORIA TX 77905	CITY; STATE; ZIP CODE	A STATE OF THE STA	
	ADEA CODE DUONE NUMBER	EVTENSION		
5 CANDIDATE/ OFFICEHOLDER PHONE	(361) 541-8244	EXTENSION	Date Her determined	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST LORI	МІ	Date Processed	
NAME	NICKNAME LAST	SUFFIX		
	PETERSON		Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT 104 MASTERS CT VICTORIA TX 77904	/ SUITE #; CITY;	STATE; ZIP CODE	
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	UUL & 0 2020	
PHONE	(361) 218-6211			
9 REPORT TYPE	January 15 30th day before	re election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15 8th day before	e election Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)	
10 PERIOD	Month Day Year	Month	Day Year	
COVERED	1 / 16 / 23	THROUGH 7	/ 21 / 23	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Prima	ary Runoff Other Description		
	Gene	- 40 b - 1 d	port	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)		
- OFFICE	TAX ASSESSOR COLLEC			
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR 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.			
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME			
Additional Pages	GENERAL COMMITTEE ADDRESS			
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME			
	COMMITTEE CAMPAIGN	TREASURER ADDRESS		
GO TO PAGE 2				

	TE / OFFICEHOLDER N FINANCE REPORT	cov	FORM C/OH ER 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)		0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		0.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	!	0.00	
	4. TOTAL POLITICAL EXPENDITURES		0.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	r DAY (172.26	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE S	0.00	
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				
ASHLEY GARCIA NOTARY PUBLIC. STATE OF TOWN Please complete either option below:				



(1) Affidavit	JUL 2 6 2023
Sworn to and subscribed before me by	Garcia Asst. Chief Deputy
OR	
(2) Unsworn Declaration	
My name is	, and my date of birth is
My address is,	(11)
(street)	(city) (state) (zip code) (country)
Executed in County, State of , on t	he day of, 20 (month) (year)
	Signature of Candidate/Officeholder (Declarant)

NOTICE OF TEXAS