

CAND DATE / OFF CE OLDER CA PA G F ANCE 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

3 CANDIDATE /
OFFICEHOLDER
NAME

MS

MR

FIRST

MI

NICKNAME

LAST

SUFFIX

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5 CANDIDATE /
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

732-0181

6 CAMPAIGN
TREASURER
NAME

MS /

MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Date Hand-delivered or Date Postmarked

7-16-2020

Receipt #

Amount \$

Date Processed

7-21-2020

Date Imaged

7-21-2020

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

4221 BLACKHAM

FORT WORTH, TX 76109

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

924-8091

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 \$500 limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

THROUGH

11 ELECTION

ELECTION DATE

Month

Day

Year

☐

Primary

☐

Runoff

☐

Other
Description

5 4 / 2015

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

SCHOOL BOARD
TRUSTEE

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

JUDY G NEEDHAM

15 Filer ID (Ethics Commission Filers)

\$ 350.00

\$ <134, 0>

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.

Quida G. am

COMMITTEE ADDRESS

Needh 21

COMMITTEE CAMPAIGN TREASURER NAME

False Daniels

COMMITTEE CAMPAIGN TREASURER ADDRESS

b

Printed name of officer administering oath

Executive Sec

SUBTOTALS - C/O

FORM C/OH
COVER SHEET PG 3

10 FILER NAME
JUDY G NEEDHAM

20 FILER ID (Ethics Commission Filer)
[REDACTED]

30 FILER TYPE
[REDACTED]

40 FILER ADDRESS
[REDACTED]

50 FILER CITY
[REDACTED]

60 FILER STATE
[REDACTED]

70 FILER ZIP
[REDACTED]

80 FILER PHONE
[REDACTED]

90 FILER FAX
[REDACTED]

100 FILER EMAIL
[REDACTED]

21 SCHEDULE SUBTOTALS		\$ 350.00
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		\$
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		\$

