

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

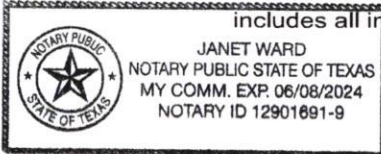
**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME *Citizens for CFISD Proven Leaders* **13 Filer ID (Ethics Commission Filers)**

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME <i>John Ogletree, Don Ryan + Bob R. Covey</i>
	<input checked="" type="checkbox"/> OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) <i>CFISD Board of Trustees Positions 5, 6 + 7, respectively</i>
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # _____ ELECTION DATE Month Day Year / /
		DESCRIPTION

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	<i>0.00</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	<i>2,630.15</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	<i>0.00</i>
	4. TOTAL POLITICAL EXPENDITURES	\$	<i>4,485.16</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	<i>0.00</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	<i>0.00</i>

16 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.



Darcy Mingoria
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Darcy Mingoria*, this the *12th* day of *January*, 20 *22*, to certify which, witness my hand and seal of office.

Signature of officer administering oath: *Janet Ward* Printed name of officer administering oath: Janet Ward Title of officer administering oath: Notary

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.
 My address is _____ (street), _____ (city), _____ (state), (zip code)(country).
 Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

Signature of Campaign Treasurer (Declarant)