

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <u>4</u>		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u>	FIRST <u>CHRISTOPHER</u>	MI <u>J</u>	Date Received	
	NICKNAME	LAST <u>POTTEET</u>	SUFFIX	Date Hand-delivered or Date Postmarked	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Final report	Receipt #	
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit	Other (specify)	Amount \$	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		Date Processed	
	<input type="checkbox"/> 8th day before election			Date Imaged	
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day
	<u>1</u>	<u>1</u>	<u>23</u>	THROUGH	<u>6</u> / <u>30</u> / <u>23</u>

6 EXPLANATION OF CORRECTION

- DID NOT ACCOUNT FOR PAYPAL & BANK FEES
- CONFUSION ON ALLOCATING TOTALS BETWEEN LINES 5 & 6 ON FORM.

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

- ☒ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
- ☐ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Christopher J Potteet  
Signature of Candidate/Officeholder

Please complete either option below:

## (1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

## (2) Unsworn Declaration

My name is CHRISTOPHER J POTTEET and my date of birth is 3/7/72

My address is 9218 MOSS TRAIL DALLAS TX 75231 DALLAS

(street) (city) (state) (zip code) (country)

Executed in DALLAS County, State of TEXAS, on the 12 day of JANUARY, 2024

(month) (year)

Christopher J Potteet  
Signature of Candidate/Officeholder (Declarant)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE 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: <b>3</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	Mr	Christopher	J		
	NICKNAME	LAST	SUFFIX	Date Received	
		Poteet			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	9218 Moss Trail			Dallas	TX 75231
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Date Hand-delivered or Date Postmarked
	(214 )	709-7868			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt # Amount \$	
	Mr	Robert		Date Processed	
	NICKNAME	LAST	SUFFIX	Date Imaged	
		Walne			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	9667 Rockpoint Ct			Dallas	TX 75238
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(214 )	676-4048			
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month	Day	Year	Month	Day Year
	1	1	23	6	30 23
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day Year	Primary	<input checked="" type="checkbox"/> Runoff	Other Description
	6	5 21	General	Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
	RISD Trustee Place 7				
14 NOTICE FROM POLITICAL COMMITTEE(S)	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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**
**15 C/OH NAME**  
Christopher James Poteet

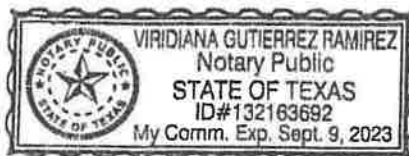
**16 Filer ID (Ethics Commission Filers)**

<b>17 CONTRIBUTION TOTALS</b>	1. 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
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,890.68
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,000.00

**18 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.

*Christopher J Poteet*  
Signature of Candidate or Officeholder

**Please complete either option below:**
**(1) Affidavit**

**NOTARY STAMP / SEAL**

Sworn to and subscribed before me by Christopher Poteet this the 26<sup>th</sup> day of July, 2023, to certify which, witness my hand and seal of office.

Viridiana Gutierrez Ramirez Viridiana Gutierrez Ramirez Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(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 Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS NAME OF SCHEDULE</b>	<b>SUBTOTAL AMOUNT</b>	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00	
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 8,000.00	
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00	
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00	
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00	
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00	
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00	