## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains ho	w to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages fi	iled:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mrs. Debbie		MI A	OFFICEUSEONLY	
	NICKNAME	LAST Renteria	SUFFIX	Date Received	03:59pm
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  Richardson, Texas TX 75081				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.		M	Receipt #	Amount \$
	NICKNAME LAST SUFFIX  McCampbell			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY; STATE; ZIP CODE  Richardson, Tx. 75081				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION				
9 REPORT TYPE	January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  X July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH-FR)				
10 PERIOD COVERED	Month 01/01/25	Day Year	Month THROUGH /	Day Year 06/30/2025	Ŋ
11 ELECTION	Month Day Year Primary Runoff Description  General Special				
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
14 NOTICE FROM POLITICAL COMMITTEE(S)  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 OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE COMMITTEE NAME				
	GENERAL SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
	_	COMMITTEE CAMPAIGN TREA	EASURER ADDRESS		
		GO TO F	PAGE 2		

Rec'd 7/10/85 @ 3:59pm

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTION     PLEDGES, LOANS, OR GUARANTEES OF LOAD CONTRIBUTIONS MADE ELECTRONICALLY)					
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARA	INTEES OF LOANS) \$ 0				
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0				
	4. TOTAL POLITICAL EXPENDITURES	\$ 0				
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINE     OF REPORTING PERIOD	ED AS OF THE LAST DAY \$ 0				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTAN LAST DAY OF THE REPORTING PERIOD	DING LOANS AS OF THE \$ 0				
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.						
		Signature of Candidate or Officeholder				
		10.100				
Please complete either option below:						
		•				
(1) Affidavit						
(1) Allidavit						
NOTARY STAMP/SEA	AL					
Sworn to and subscribed before me by this the day of,						
20, to certif	fy which, witness my hand and seal of office.					
Signature of officer administ	ering oath Printed name of officer administering	g oath Title of officer administering oath				
OR						
(2) Unsworn Declarati	ion					
My name isDebbie Rei	mteria	I my date of hith is				
My address is	12 Table 17					
in, address is	(street)	(city) (state) (zip code) (country)				
Executed in		day ofjuly, 20_25(year)				
	I <del></del>	Signature of Candidate/Officeholder (Declarant)				