

**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:
3 CANDIDATE / OFFICEHOLDER NAME	MS MRS / MR: <u>MS</u> FIRST: <u>Danna</u> MI: <u>M</u> NICKNAME: _____ LAST: _____ SUFFIX: _____ <u>Spicer</u>	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS PO BOX, APT / SUITE #: CITY: STATE: ZIP CODE <u>113 W Beaufogard</u> <u>San Angelo TX 76903</u>	Date Received JAN 6 2020	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>16325</u> <u>659 6520</u> <u>WOLK</u>	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: <u>MRS</u> FIRST: <u>Jackie</u> MI: <u>S</u> NICKNAME: _____ LAST: _____ SUFFIX: _____ <u>Wolf</u>	Receipt #	Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE <u>131 Mesquite</u> <u>San Angelo, TX 76905</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () <u>325-</u> <u>656</u> <u>7750</u>		
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C.OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>7 / 1 / 2019</u> <u>12 / 31 / 2019</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>11 / 6 / 19</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <u>Treasurer</u>	13 OFFICE SOUGHT (if known) <u>Treasurer</u>	
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