CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

O0069780 4 Date Received SANDIDATE / OFFICEHOLDER NAME MS / MRS / MR FIRST MI ELECTRONICALLY FILED O1/29/2024 NICKNAME NICKNAME LAST SUFFIX O1/29/2024 ORIGINAL REPORT TYPE July 15 Exceeded modified reporting limit Report (Attach C/OH-FR) SOURIGINAL REPORT TYPE SOURIGINAL REPORT TYPE Month Day Year Month Day Year O1/01/2023 THROUGH 06/30/2023 OUTPICE 03E ONLT Date Received ELECTRONICALLY FILED O1/29/2024 Date Hand-delivered or Date Postmarked Date Hand-delivered or Date Postmarked Part Amount Date Processed Date Processed									
3 CANDIDATE/ OFFICHOLDER NAME NICKNAME LAST SUFFIX Coreshaw Date Hand-delivered or Date Postmarked APPORT TYPE April 2004 APPORT TYPE April 2004 APPORT TYPE April 2004 APPORT TYPE Appointment (officeholder only) Bin day before election Bin day before electi	1 Filer ID (Ethics Commission Filers)			2 Total pages filed:		OFFICE USE ONLY			
OFFICIAL DER NAME NICKNAME LAST SUFFIX Date trand-delivered or Date Postervaled		00069780	00069780		4		Date Received		
NAME NICKNAME LAST SUFFIX Crenshaw	3		MS / MRS / MR	FIRST		MI	ELECTRONICA	LLY FILED	
A ORIGINAL REPORT TYPE			Ms.	Sandra			01/29/2024		
A ORIGINAL REPORT TYPE		10 11112	NICKNAME	LAST		SUFFIX	1		
4 ORIGINAL REPORT TYPE				Crenshaw			Data Hand delicered and	Data Baston advad	
REPORT TYPE July 15	4	ORIGINAL				specify)	Date Hand-delivered or i	Date Postmarked	
Some to and subscribed before me, by the said		REPORT TYPE		Exceeded modified	ш		Receipt #	Amount	
Seminanual reports: swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Seminanual reports: 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. When the post of the penalty of perjury, that this corrected report is true and correct.				<u></u>	· • —				
5 ORIGINAL PERIOD Nonth Day Year O1/01/2023 THROUGH O6/30/2023 7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semianual reports Sewear, or affirm, that the original report was made in good ratin.				appointment (office	t (officeholder only)		Date Processed	1	
TAFFIDAVIT I am filing this report to correct the date back to the original period Jan 1, 2023 to June 30, 2023 I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: 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 the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or ormission in the report as originally filed was made in good faith. AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said, to certify which, witness my hand and seal of office.			8th day before election	Final Report (Attach	n C/OH-FR)				
SEMPLANATION OF CORRECTION	5		Month Day Yea		Month Day	Year	Date Imaged		
I am filing this report to correct the date back to the original period Jan 1, 2023 to June 30, 2023			01/01/2023	THROUGH	06/30/2023				
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Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said							·	3 ,	
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Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said								RONICALLY FILED D24 delivered or Date Postmarked Amount seed corrected report is true ents: the original report original report original delivered or to eport. diling this corrected r the date I learned r incomplete. I ne report as originally older	
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		AFFIX NOTARY ST	AMP / SEAL ABOVE						
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	Sworn to and subscribed before me, by the said day of, this the day of, 20, to certify which, witness my hand and seal of office.						day		
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath									
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath									
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The or officer duffinitioning out.		Signature of office	er administering oath	Printed name of of	ficer administering oa	th T	itle of officer admin	istering oath	
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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 (ete this form.	this form. 1 Filer ID (Ethics Commission Filers) 00069780		2 Total pages filed: 4			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY	
NAME	Ms.	Sandra			Date Received		
					ELECTRONICA	LLY FILED	
	NICKNAME	LAST		SUFFIX	01/29/2024		
		Crenshaw					
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked	
OFFICEHOLDER MAILING ADDRESS	P.O. Box 224123				Receipt #	Amount	
Change of Address	Dallas, TX 75222						
	Duild3, 17, 73222				Date Processed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	_		
TREASURER NAME		Sandra					
	NICKNAME	LAST		SUFFIX			
	THISTAW WILL	Crenshaw		33.11%			
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	/ SUITE #; CITY;	STA	TE; ZIP CODE	
TREASURER ADDRESS	P.O. Box 224123						
(Residence or Business)	Dallas, TX 75222						
	Dallas, 17 75222						
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	EXTENSION				
TREASURER	(214) 498-5298	ie nomben	JAN ENGIGIA				
PHONE	, , , , , , , , , , , , , , , , , , , ,						
8 REPORT TYPE		7			-		
	January 15	30th day before	election	Runoff	15th day after cam appointment (office		
	X July 15	8th day before 6	election	Exceeded modified	Final Report (Attac	ch C/OH-FR)	
				reporting limit			
9 PERIOD COVERED	Month Day Year		IDOLIO!	Month Day	Year		
COVERED	01/01/2023	IH	IROUGH	06/30/202	23		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year	X Pi	rimary	Runoff	Other		
	03/05/2024	G	eneral	Special			
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT			
	None District 100 Dallas			State Represent	tative Place dallas	District 100	
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 4

13 C / OH NAME	C / OH NAME Crenshaw, Sandra (Ms.)			14 Filer ID (Ethics Commission Filers) 00069780			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE						
_	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)			\$ 750.00			
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 750.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 750.00			
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 750.00			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	\$ 0.00					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 442.00			
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Ms. S	Sandra Crenshaw				
Signature of Candidate or Officeholder							
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.							
						Signature of office	cer administering

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				4 of 4		
18 FILER NAME Crenshaw, Sandra (Ms.) 19 Filer ID (Ethics Commission Filers) 00069780						
	NAME OF SCHEDULE			SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			750.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					
3.	. SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	. SCHEDULE E: LOANS					
5. X	. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			750.00		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$			
10.	0. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$			
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			