

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission Filers)	<b>2 Total pages filed:</b> <b>2 Pages</b>
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR FIRST <b>Joel</b> MI <b>Ignacio</b> NICKNAME LAST <b>Ortega</b> SUFFIX	<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered Postmarked Receipt # Amount Date Processed Date Imaged <div style="text-align: center; border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">                     2014 JUL 10 PM 6:41                      TARRANT COUNTY                      CLERK OF COUNTY CLERK                      JEFFREY M. CALLENEN                      CLERK OF COUNTY CLERK                 </div>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> change of address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE <b>22943 Shady Forest Dr. Elmendorf TX 78112</b>		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION <b>210 399-7195</b>		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR FIRST <b>Joel</b> MI <b>Ignacio</b> NICKNAME LAST <b>Ortega</b> SUFFIX		
<b>7 CAMPAIGN TREASURER ADDRESS (residence or business)</b>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE <b>22943 Shady Forest Dr. Elmendorf TX 78112</b>		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION <b>(210) 399-7195</b>		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" 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)		
<b>10 PERIOD COVERED</b>	Month Day Year    THROUGH    Month Day Year <b>6 / 30 / 2014    THROUGH    7 / 8 / 2014</b>		
<b>11 ELECTION</b>	ELECTION DATE Month Day Year <b>8 / 9 / 2014</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b> <b>Alderman for City of Sandy Oaks</b>	
<b>GO TO PAGE 2</b>			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> Joel I. Ortega	<b>15 ACCOUNT #</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> 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.	
	<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>
	(This area is mostly blank with a diagonal line drawn across it.)	
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<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$0
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0
	4. TOTAL POLITICAL EXPENDITURES	\$0
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0

**18 AFFIDAVIT**

AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said JOEL I. ORTEGA, this the 10<sup>th</sup> day of July, 20 2014, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
 Signature of officer administering oath

Dora G. Vasquez  
 \_\_\_\_\_  
 Printed name of officer administering oath

Notary  
 \_\_\_\_\_  
 Title of officer administering oath

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <b>2 Pages</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Joel	MI Ignacio
	NICKNAME	LAST Ortega	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	22943 Shady Forest Dr. Elmendorf TX 78112		
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	210	399-7195	
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	(210)	399-7195	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
10 PERIOD COVERED	Month	1Day	Year
	7	16	2014
11 ELECTION	Month	Day	Year
	8	9	2014
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		Alderman for City of Sandy Oaks	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

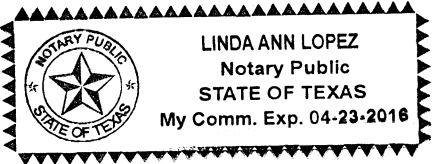
FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> Joel I. Ortega	<b>15 ACCOUNT #</b> (Ethics Commission Filers)
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<input type="checkbox"/> additional pages	<b>COMMITTEE TYPE</b>  <input checked="" type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b> S.O.P.A.C --- Sandy Oaks Political Action Committee
		<b>COMMITTEE ADDRESS</b> P.O. Box 377 Von Ormy TX 78073
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b> Charlotte Rabe
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> P.O. Box 377 Von Ormy TX 78073

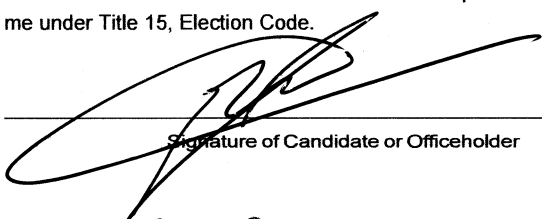
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**18 AFFIDAVIT**

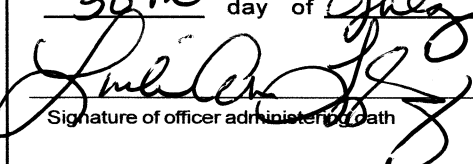




AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Joel Ortega, this the 30<sup>th</sup> day of July, 20 14, 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