

# 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</b> Filer ID (Ethics Commission Filers)  | <b>2</b> Total pages filed:<br><div style="text-align: center; font-size: 24px; font-weight: bold;">2</div> |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; font-size: 8px;">FIRST</td> <td style="width:15%; font-size: 8px;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 18px;">Kara</td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 24px;">Sands</td> <td></td> </tr> </table>   | MS / MRS / MR                                 | FIRST   | MI                                  |   | Kara                            |  | NICKNAME   | LAST   | SUFFIX  |  | Sands   |   | <div style="text-align: center; font-weight: bold; font-size: 12px;">OFFICE USE ONLY</div> <hr/> <p style="font-size: 10px;">Date Received</p> <p style="text-align: center; font-weight: bold; font-size: 14px;">FILED FOR RECORD<br/>AT 12:00 PM<br/>JUL 15 2020</p> <p style="font-size: 10px; text-align: center;">KARA SANDS<br/>CLERK, COUNTY COURT, NUECES COUNTY, TEXAS<br/>BY <u>AM</u> DEPUTY</p> <hr/> <p style="font-size: 10px;">Date Hand-delivered or Date Postmarked</p> <hr/> <table style="width:100%; font-size: 10px;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table> |   | Receipt # | Amount \$ | Date Processed |  | Date Imaged |  |  |  |       |
| MS / MRS / MR   | FIRST   | MI  |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
|   | Kara  |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| NICKNAME  | LAST  | SUFFIX  |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
|   | Sands   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Receipt #   | Amount \$   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Date Processed  |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Date Imaged   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> Change of Address | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:25%; font-size: 8px;">APT / SUITE #;</td> <td style="width:25%; font-size: 8px;">CITY;</td> <td style="width:25%; font-size: 8px;">STATE;</td> <td style="width:20%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; font-size: 18px;">PO Box 181555<br/>CC, TX 78404</td> </tr> </table>   |   |   | ADDRESS / PO BOX;                   | APT / SUITE #;                                    | CITY;                           | STATE;   | ZIP CODE   | PO Box 181555<br>CC, TX 78404                    |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| ADDRESS / PO BOX;   | APT / SUITE #;  | CITY;   | STATE;  | ZIP CODE                            |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| PO Box 181555<br>CC, TX 78404   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>5</b> CANDIDATE / OFFICEHOLDER PHONE   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">AREA CODE</td> <td style="width:50%; font-size: 8px;">PHONE NUMBER</td> <td style="width:25%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td style="text-align: center; font-size: 18px;">(3)</td> <td></td> <td></td> </tr> </table>  |   |   | AREA CODE                           | PHONE NUMBER                                      | EXTENSION                       | (3)  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| (3)   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>6</b> CAMPAIGN TREASURER NAME  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:35%; font-size: 8px;">FIRST</td> <td style="width:15%; font-size: 8px;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 18px;">Monica</td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="font-size: 8px;">LAST</td> <td style="font-size: 8px;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: 24px;">Ledcsma</td> <td></td> </tr> </table>   | MS / MRS / MR                                 | FIRST   | MI                                  |   | Monica                          |  | NICKNAME   | LAST   | SUFFIX  |  | Ledcsma |   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>  |   | Receipt # | Amount \$ | Date Processed |  | Date Imaged |  |  |  |       |
| MS / MRS / MR   | FIRST   | MI  |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
|   | Monica  |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| NICKNAME  | LAST  | SUFFIX  |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
|   | Ledcsma   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Receipt #   | Amount \$   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Date Processed  |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Date Imaged   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>7</b> CAMPAIGN TREASURER ADDRESS<br>(Residence or Business)                                  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:15%; font-size: 8px;">STATE;</td> <td style="width:15%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; font-size: 18px;">10321 Hercules<br/>CC, TX 78410</td> </tr> </table>   |   |   | STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;                                    | CITY;                           | STATE;   | ZIP CODE   | 10321 Hercules<br>CC, TX 78410                   |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;  | CITY;   | STATE;  | ZIP CODE                            |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| 10321 Hercules<br>CC, TX 78410  |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>8</b> CAMPAIGN TREASURER PHONE   | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">AREA CODE</td> <td style="width:50%; font-size: 8px;">PHONE NUMBER</td> <td style="width:25%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td style="text-align: center; font-size: 18px;">( )</td> <td></td> <td></td> </tr> </table>  |   |   | AREA CODE                           | PHONE NUMBER                                      | EXTENSION                       | ( )  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| AREA CODE   | PHONE NUMBER  | EXTENSION                                     |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| ( )   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>9</b> REPORT TYPE  | <table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>  |   |   | <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 \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR) |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <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 \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR)  |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>10</b> PERIOD COVERED  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> <td style="width:10%; font-size: 8px;">THROUGH</td> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:15%; font-size: 8px;">Year</td> </tr> <tr> <td style="text-align: center; font-size: 24px;">1</td> <td style="text-align: center; font-size: 24px;">/</td> <td style="text-align: center; font-size: 24px;">1</td> <td></td> <td style="text-align: center; font-size: 24px;">6</td> <td style="text-align: center; font-size: 24px;">/</td> <td style="text-align: center; font-size: 24px;">30</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: center; font-size: 24px;">/2020</td> <td></td> <td colspan="2"></td> <td style="text-align: center; font-size: 24px;">/2020</td> </tr> </table> |   |   | Month                               | Day   | Year                            | THROUGH  | Month  | Day  | Year  | 1  | /       | 1 |  | 6 | /         | 30        |                |  | /2020       |  |  |  | /2020 |
| Month   | Day   | Year  | THROUGH   | Month                               | Day   | Year                            |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| 1   | /   | 1   |   | 6                                   | /   | 30                              |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
|   |   | /2020   |   |                                     |   | /2020                           |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>11</b> ELECTION  | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; font-size: 8px;">ELECTION DATE</td> <td colspan="2" style="width:60%; font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 8px;">Month      Day      Year</td> <td colspan="2" style="font-size: 8px;"> <input type="checkbox"/> Primary      <input type="checkbox"/> Runoff      <input type="checkbox"/> Other Description<br/> <input type="checkbox"/> General      <input type="checkbox"/> Special             </td> </tr> <tr> <td style="text-align: center; font-size: 18px;">/ /</td> <td colspan="2"></td> </tr> </table>   |   |   | ELECTION DATE                       | ELECTION TYPE                                     |                                 | Month      Day      Year   | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description<br><input type="checkbox"/> General <input type="checkbox"/> Special |  | / /   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| ELECTION DATE   | ELECTION TYPE   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| Month      Day      Year  | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description<br><input type="checkbox"/> General <input type="checkbox"/> Special  |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| / /   |   |   |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |
| <b>12</b> OFFICE  | OFFICE HELD (if any)<br><div style="font-size: 24px; font-weight: bold; text-align: center;">Nueces County Clerk</div>  | <b>13</b> OFFICE SOUGHT (if known)            |   |                                     |   |                                 |  |  |  |   |  |         |   |  |   |           |           |                |  |             |  |  |  |       |

2020-0107

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**14** C/OH NAME Kara Sands **15** Filer ID (Ethics Commission Filers)

**16** 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.

|  |                |                                      |
|--|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC<br><br><input type="checkbox"/> Additional Pages | COMMITTEE TYPE | COMMITTEE NAME                       |
|  |                | COMMITTEE ADDRESS                    |
|  |                | COMMITTEE CAMPAIGN TREASURER NAME    |
|  |                | COMMITTEE CAMPAIGN TREASURER ADDRESS |

|                               |   |       |
|-------------------------------|---|-------|
| <b>17</b> CONTRIBUTION TOTALS | 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  |
| EXPENDITURE TOTALS            | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ 20 |
|                               | 4. TOTAL POLITICAL EXPENDITURES   | \$ 20 |
| CONTRIBUTION BALANCE          | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ 0  |
| OUTSTANDING LOAN TOTALS       | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ 0  |

**18** AFFIDAVIT

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.

Kara Sands  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kara Sands, this the 15th day of July, 2020, to certify which, witness my hand and seal of office.

Lourdes Vasquez  
Signature of officer administering oath

Lourdes Vasquez  
Printed name of officer administering oath

Title of officer administering oath