# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

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The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR) FIRST  Thuny  NICKNAME LAST	MI SUFFIX	OFFICE USE C	ONLY	
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address  5 CANDIDATE/		CITY; STATE; ZIP CODE  EXTENSION	ADJ	NO NO	
OFFICEHOLDER PHONE	(361) 652-7057		Date Hand-delive est pail	Po marker	
6 CAMPAIGN TREASURER NAME	NICKNAME LAST	MISUFFIX	Date Processed  Date Imaged JAN 1	8 2022	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SI		ZIP CODE		
8 CAMPAIGN TREASURER PHONE	(341) 652 7933	EXTENSION			
9 REPORT TYPE	January 15 30th day before e		15th day after camp treasurer appointme (Officeholder Only)  Final Report (Attach	ent	
10 PERIOD COVERED	Month Day Year	THROUGH	Day Year		
11 ELECTION	Month Day Year Primary General	ELECTION TYPE  Runoff Other Description  Special			
12 OFFICE	County Commissioner	13 OFFICE SOUGHT (if known)	,		
GO TO PAGE 2					

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

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14 C/OH NAME	Danny 6	Dascia	5 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.				
	COMMITTEE TYPE				
	SPECIFIC	COMMITTEE ADDRESS			
	Management of the Control of the Con	COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAI S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$ 0		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6		
EXPENDITURE TOTALS	3. TOTAL F UNLESS	\$ 0			
	4. TOTAL	\$ &			
CONTRIBUTION BALANCE	5. TOTAL F	S 136.17			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 11,400		
18 AFFIDAVIT					
No. of the second secon	LISA ANN RAMIREZ otary Public, State of T My Commission Expir July 14, 2024 NOTARY ID 1052634	true and correct and includes all infor under Title 15, Election Code.	rjury, that the accompanying report is mation required to be reported by me		
AFFIX NOTARY STAM	IP/SEALABOVE				
Sworn to and subsc			, this the		
tay of Jan 18, 20 27, to certify which, witness my hand and seal of office.					
	MM Control	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					

## SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

19	FILER NAME  20 Filer ID (Ethics Co.	mmission	ı Filers)
21	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$ 11	,400
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	1
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	1

LOANS			SCHEDULE <b>E</b>
The Instruction Guide explains how to complete this form.			1 Total pages Schedule E:
2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED LOANS			\$ 11,400
5 Date of loan	7 Name of lender out-of-state PAC (ID#:)  Frances Garcia		9 Loan Amount (\$)
6 Is lender a financial Institution?	8 Lender address; City; State; Zip Code		10 Interest rate
Y(N)	(N) 1300 Falty sele Victoria TX 77905 11 Maturity date		
12 Principal occupation	n / Job title (See Instructions)	13 Employer (See Instructions)	
14 Description of Collateral		15 Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
not applicable		State; Zip Code	
20 Principal Occupat	on (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender out-of-state PAC (ID#:)		Loan Amount (\$)
Is lender a financial	Lender address; City; State; Zip Code		Interestrate
Institution? Y			Maturity date
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		Employer (See Instructions)	
Description of Collateral  Check if personal funds account (See Instruction  none		Check if personal funds were account (See Instructions)	deposited into political
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
not applicable	Guarantor address; City;	State; Zip Code	
	on (See Instructions)	Employer (See Instructions)	
lf I	ATTACH ADDITIONAL Co	OPIES OF THIS SCHEDULE AS N	EEDED eporting requirements.