

# 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:																														
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: small;">MS / MRS / MR</td> <td style="width:30%;"></td> <td style="width:15%; font-size: small;">FIRST</td> <td style="width:30%;"></td> <td style="width:10%; font-size: small;">MI</td> <td style="width:10%;"></td> </tr> <tr> <td></td> <td>Mr</td> <td>Michael</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td></td> <td style="font-size: x-small;">LAST</td> <td></td> <td style="font-size: x-small;">SUFFIX</td> <td></td> </tr> <tr> <td></td> <td colspan="4" style="text-align: center;">Torres</td> <td></td> </tr> </table>	MS / MRS / MR		FIRST		MI			Mr	Michael				NICKNAME		LAST		SUFFIX			Torres					<div style="text-align: center; border: 1px solid black; padding: 5px;"> <b>OFFICE USE ONLY</b>                   Date Received   <div style="font-size: 2em; font-weight: bold;">Received</div>  <div style="font-size: 1.5em; font-weight: bold;">JAN 15 2019</div>   <div style="font-size: 1.2em; font-weight: bold;">Elections Office</div> </div> <div style="border: 1px solid black; padding: 2px; font-size: x-small;">                 Date Hand-delivered or Date Postmarked             </div> <table style="width:100%; border-collapse: collapse; font-size: x-small;"> <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	
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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

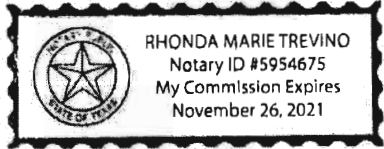
14 C/OH NAME	15 Filer ID (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES 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.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	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	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 58.42
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.



AFFIX NOTARY STAMP / SEAL ABOVE

*[Signature]*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mike Torres, this the 15 day of 15 Jan, 2019, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Rhonda M Trevino

Printed name of officer administering oath

Notary

Title of officer administering oath

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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	<b>Torres</b>		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; <b>121 Ina Ct</b>	APT / SUITE #;	CITY; <b>Kyle</b>
	STATE; <b>TX</b>	ZIP CODE <b>78640</b>	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>( 512 )</b>	PHONE NUMBER <b>667-3905</b>	EXTENSION
	<b>Garcia</b>		
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<b>10</b> PERIOD COVERED	Month <b>07</b>	Day <b>01</b>	Year <b>2018</b>
	THROUGH	Month <b>12</b>	Day <b>31</b>
<b>11</b> ELECTION	ELECTION DATE Month Day Year <b>11 / 8 / 2016</b>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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14 C/OH NAME

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COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION  
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EXPENDITURE  
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\$

4. TOTAL POLITICAL EXPENDITURES

\$

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CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$

58.42

OUTSTANDING  
LOAN TOTALS

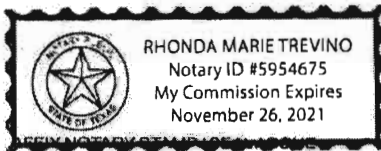
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\$

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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.



*Mike Torres*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mike Torres, this the 15 day of Jan, 20 19, to certify which, witness my hand and seal of office.

*Rhonda M. Trevino*

Signature of officer administering oath

Rhonda M Trevino

Printed name of officer administering oath

Notary

Title of officer administering oath