CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Comm	nission Filers)	2 Total pages filed:	OFFICE USE ONLY
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST SUSQN NICKNAME LAST	L MI	Date Received Received 1-13-22
4 ORIGINAL REPORT TYPE	January 15 Rul July 15 Exc limi 30th day before election	noff Final repo	Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed
5 ORIGINAL PERIOD COVERED	Month Day Year 7 / 1 /2019 Th	Month Day	Year Date Imaged
	balanee on Wive balance not		page 2- Should
7 SIGNATURE I swe	ear, or affirm, under penalty of	perjury, that this corrected re	eport is true and correct.
Chec	ck ONLY if applicable:		
Semiannual	reports: I swear, or affirm, that on misrepre-sent the information of	the original report was made in	good faith and without an intent to
Other report	s: I swear, or affirm, that I am fil	ling this corrected report not lated is inaccurate or incomplete, made in good with.	er than the 14th business day after the I swear, or affirm, that any error or
		Signature or C	Candidate/Officeholder
(1) Affidavit	Please co	omplete either option be	low:
NOTARY STAMP/SEA	L		
Sworn to and subscribed	before me by <u>Susan</u>	worner this	the 13th day of January,
20 22, to certify	Whom with essent than dang seal of of VONA HUDS		Notary
Signature of officer administe	ering pean Notary Public, State of Notary Public, Stat	or Texes	Title of officer administering oath
		OR	
(2) Unsworn Declarati	ion		
My name is		, and my date of bir	th is
My address is			٠ اســـــــ اســـــــ ا
	(street)	(city)	(state) (zip code) (country)
Executed in	County, State of	, on theday of (r	nonth) , 20
		Signature of C	andidate/Officeholder (Declarant)
Remember To Atta	ch 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 2

15 C/OH NAME SUSAN WERNER		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	\$ 1522.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	F THE \$
	swear, or affirm, under penalty of perjury, that the accompanying report is tru quired to be reported by me under Title 15, Election Code.	e and correct and includes all information
	Signature of Ca	andidate or Officeholder
	Please complete either option below	v:
(1) Affidavit	LINDA B. SIMPSON Notary Public STATE OF TEXAS ID# 12939334-2 My Comm. Exp. April 19, 2025	
Curam to and subscribed	before me by Susan Werner this the	13 day of January,
Sworn to and subscribed		_ i Juituui J
20 to certify	which, witness my hand and seal of office.	
- WA	As Linda B. Simpson	Title of officer administrator with
Signature of officer administration		Title of officer administering oath
	OR.	
(2) Unsworn Declarati	ion	
My name is	, and my date of birth is	
wy address is	(street) (city)	(state) (zip code) (country)
Executed in	County, State of , on the day of (mont	, 20
	Signature of Cand	idate/Officeholder (Declarant)