

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

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|--|--|--|--|
| The C/OH Instruction Guide explains how to complete this form. |  | 1 Filer ID (Ethics Commission Filers)  | 2 Total pages filed: <span style="border: 1px solid black; border-radius: 50%; padding: 2px 5px;">2</span> |
| 3 CANDIDATE / OFFICEHOLDER NAME                                | MS / MRS / MR <span style="border: 1px solid black; border-radius: 50%; padding: 0 2px;">MR</span> FIRST <u>JASON</u> MI <u>K</u><br>NICKNAME <u>JJ</u> LAST <u>JOHNSON</u> SUFFIX   | <b>OFFICE USE ONLY</b><br>Date Received: <u>2021 JAN 25 AM 9:02</u><br>LAURA A. HUGHES<br>COUNTY CLERK<br>FILED FOR RECORD<br>KAUFMAN CO TEXAS<br>Date Hand-delivered or Postmarked: <u>2021 JAN 25 AM 9:02</u><br>Receipt #      Amount \$<br>Date Processed<br>Date Imaged |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS                     | ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE<br><input type="checkbox"/> Change of Address   |  |  |
| 5 CANDIDATE / OFFICEHOLDER PHONE                               | AREA CODE      PHONE NUMBER      EXTENSION   |  |  |
| 6 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR <span style="border: 1px solid black; border-radius: 50%; padding: 0 2px;">MRS</span> FIRST <u>AMANDA</u> MI <u>N</u><br>NICKNAME      LAST <u>JOHNSON</u> SUFFIX  |  |  |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business)           | STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE<br><u>16402 CR 221 FORTY, TX 75126</u>   |  |  |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE      PHONE NUMBER      EXTENSION<br><u>(972) 742-5363</u>  |  |  |
| 9 REPORT TYPE  | <input checked="" 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)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR) |  |  |
| 10 PERIOD COVERED  | Month      Day      Year      THROUGH      Month      Day      Year<br><u>10 / 15 / 2020</u> THROUGH <u>1 / 15 / 2021</u>  |  |  |
| 11 ELECTION  | ELECTION DATE      ELECTION TYPE<br>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  |  |  |
| 12 OFFICE  | OFFICE HELD (if any)<br><u>Kaufman Co Constable Pet 2</u>  | 13 OFFICE SOUGHT (if known)<br><u>Kaufman Co Constable Pet 2</u>   |  |
| 14 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"/> Additional Pages                      | COMMITTEE TYPE<br><input type="checkbox"/> GENERAL<br><input type="checkbox"/> SPECIFIC  | COMMITTEE NAME   | COMMITTEE ADDRESS  |
|  |  | COMMITTEE CAMPAIGN TREASURER NAME  | COMMITTEE CAMPAIGN TREASURER ADDRESS   |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

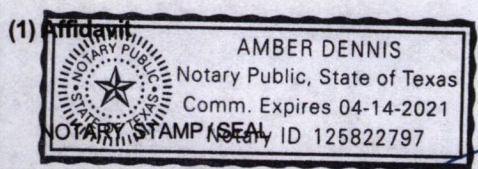
FORM C/OH  
COVER SHEET PG 2

|                                      |   |  |
|--------------------------------------|---|--|
| 15 C/OH NAME<br><u>JASON JOHNSON</u> |   | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS               | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ <u>412.88</u>                       |
|                                      | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ <u>5627.88</u>                      |
| EXPENDITURE TOTALS                   | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.  | \$ <u>3360.01</u>                      |
|                                      | 4. TOTAL POLITICAL EXPENDITURES   | \$ <u>6120.65</u>                      |
| CONTRIBUTION BALANCE                 | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  | \$ <u>5627.88</u>                      |
| OUTSTANDING LOAN TOTALS              | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$                                     |

18 SIGNATURE 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]  
Signature of Candidate or Officeholder

Please complete either option below:



Sworn to and subscribed before me by JASON JOHNSON this the 14th day of July, 2020, to certify which, witness my hand and seal of office.

Amber Dennis Signature of officer administering oath  
Amber Dennis Printed name of officer administering oath  
Notary Title of officer administering oath

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)