

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

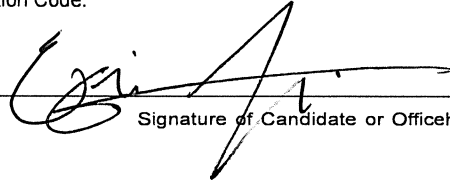
|                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------|----------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------|-----------|------|---------------------------------------------|----------------------------------|--|--|--|--|
| The C/OH Instruction Guide explains how to complete this form. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1 Filer ID (Ethics Commission Filers)                                 | 2 Total pages filed:<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:20%; font-size: 8px;">MS / MRS / MR</td> <td style="width:40%; font-size: 8px;">FIRST</td> <td style="width:20%; font-size: 8px;">MI</td> </tr> <tr> <td>Mr.</td> <td>Erwin</td> <td>A.</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>Garcia-Roacho</td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                | MS / MRS / MR                                                         | FIRST                                                                                                | MI                                  | Mr.                                                          | Erwin                            | A.                                                                                         | NICKNAME                               | LAST                                             | SUFFIX                                                     |                                                          | Garcia-Roacho                                                                                        |                                            | <b>OFFICE USE ONLY</b> |           |      |                                             |                                  |  |  |  |  |
| MS / MRS / MR                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | MI                                                                    |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| Mr.                                                            | Erwin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | A.                                                                    |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| NICKNAME                                                       | LAST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SUFFIX                                                                |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
|                                                                | Garcia-Roacho                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS              | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:15%; 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:25%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td><input type="checkbox"/> Change of Address</td> <td colspan="4">2521 Mesa Valley Dr. McKinney Tx 75011</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                         | ADDRESS / PO BOX;                                                     | APT / SUITE #;                                                                                       | CITY;                               | STATE;                                                       | ZIP CODE                         | <input type="checkbox"/> Change of Address                                                 | 2521 Mesa Valley Dr. McKinney Tx 75011 |                                                  |                                                            |                                                          | Date Received<br><div style="font-size: 24px; font-weight: bold;">4/1/2021</div><br><i>in person</i> |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| ADDRESS / PO BOX;                                              | APT / SUITE #;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | CITY;                                                                 | STATE;                                                                                               | ZIP CODE                            |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <input type="checkbox"/> Change of Address                     | 2521 Mesa Valley Dr. McKinney Tx 75011                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>5</b> CANDIDATE / OFFICEHOLDER PHONE                        | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:20%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td>(909)</td> <td>851-3421</td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | AREA CODE                                                             | PHONE NUMBER                                                                                         | EXTENSION                           | (909)                                                        | 851-3421                         |                                                                                            | Date Hand-delivered or Date Postmarked |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| AREA CODE                                                      | PHONE NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | EXTENSION                                                             |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| (909)                                                          | 851-3421                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>6</b> CAMPAIGN TREASURER NAME                               | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">MS / MRS / MR</td> <td style="width:40%; font-size: 8px;">FIRST</td> <td style="width:20%; font-size: 8px;">MI</td> </tr> <tr> <td>Mr.</td> <td>Erwin</td> <td>A.</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>Garcia-Roacho</td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                | MS / MRS / MR                                                         | FIRST                                                                                                | MI                                  | Mr.                                                          | Erwin                            | A.                                                                                         | NICKNAME                               | LAST                                             | SUFFIX                                                     |                                                          | Garcia-Roacho                                                                                        |                                            | Receipt #              | Amount \$ |      |                                             |                                  |  |  |  |  |
| MS / MRS / MR                                                  | FIRST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | MI                                                                    |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| Mr.                                                            | Erwin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | A.                                                                    |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| NICKNAME                                                       | LAST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SUFFIX                                                                |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
|                                                                | Garcia-Roacho                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>7</b> CAMPAIGN TREASURER ADDRESS                            | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:10%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td>(Residence or Business)</td> <td colspan="4">2521 Mesa Valley Dr. McKinney Tx 75071</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                           |                                                                       |                                                                                                      | STREET ADDRESS (NO PO BOX PLEASE);  | APT / SUITE #;                                               | CITY;                            | STATE;                                                                                     | ZIP CODE                               | (Residence or Business)                          | 2521 Mesa Valley Dr. McKinney Tx 75071                     |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| STREET ADDRESS (NO PO BOX PLEASE);                             | APT / SUITE #;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | CITY;                                                                 | STATE;                                                                                               | ZIP CODE                            |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| (Residence or Business)                                        | 2521 Mesa Valley Dr. McKinney Tx 75071                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
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| AREA CODE                                                      | PHONE NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | EXTENSION                                                             |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| (909)                                                          | 851-3421                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>9</b> REPORT TYPE                                           | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"><input type="checkbox"/> January 15</td> <td style="width:20%;"><input checked="" type="checkbox"/> 30th day before election</td> <td style="width:20%;"><input type="checkbox"/> Runoff</td> <td style="width:40%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>                                                                                                                                                                                      |                                                                       |                                                                                                      | <input type="checkbox"/> January 15 | <input checked="" type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff  | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) | <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) |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <input type="checkbox"/> January 15                            | <input checked="" type="checkbox"/> 30th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Runoff                                       | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)           |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <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)                                             |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>10</b> PERIOD COVERED                                       | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> <td style="width:20%; 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:10%; font-size: 8px;">Year</td> </tr> <tr> <td>02</td> <td>10</td> <td>2021</td> <td></td> <td>04</td> <td>01</td> <td>2021</td> </tr> </table>                                                                                                                                                                                                                                                                                                                            |                                                                       |                                                                                                      | Month                               | Day                                                          | Year                             | THROUGH                                                                                    | Month                                  | Day                                              | Year                                                       | 02                                                       | 10                                                                                                   | 2021                                       |                        | 04        | 01   | 2021                                        |                                  |  |  |  |  |
| Month                                                          | Day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Year                                                                  | THROUGH                                                                                              | Month                               | Day                                                          | Year                             |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| 02                                                             | 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2021                                                                  |                                                                                                      | 04                                  | 01                                                           | 2021                             |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>11</b> ELECTION                                             | <table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: 8px;">ELECTION DATE</td> <td colspan="3" style="font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="width:10%; font-size: 8px;">Month</td> <td style="width:10%; font-size: 8px;">Day</td> <td style="width:10%; font-size: 8px;">Year</td> <td style="width:10%;"><input type="checkbox"/> Primary</td> <td style="width:10%;"><input type="checkbox"/> Runoff</td> <td style="width:10%;"><input type="checkbox"/> Other Description</td> </tr> <tr> <td>MAY</td> <td>01</td> <td>2021</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>                                                                                                                                        | ELECTION DATE                                                         |                                                                                                      |                                     | ELECTION TYPE                                                |                                  |                                                                                            | Month                                  | Day                                              | Year                                                       | <input type="checkbox"/> Primary                         | <input type="checkbox"/> Runoff                                                                      | <input type="checkbox"/> Other Description | MAY                    | 01        | 2021 | <input checked="" 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                   |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| MAY                                                            | 01                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2021                                                                  | <input checked="" type="checkbox"/> General                                                          | <input type="checkbox"/> Special    |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>12</b> OFFICE                                               | OFFICE HELD (if any)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>13</b> OFFICE SOUGHT (if known)<br>Place 3, MISD Board of Trustees |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)                   | <p style="font-size: 8px;">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.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">COMMITTEE TYPE</td> <td style="font-size: 8px;">COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> |                                                                       |                                                                                                      | COMMITTEE TYPE                      | COMMITTEE NAME                                               | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS                                                                          | <input type="checkbox"/> SPECIFIC      | COMMITTEE CAMPAIGN TREASURER NAME                |                                                            | COMMITTEE CAMPAIGN TREASURER ADDRESS                     |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| COMMITTEE TYPE                                                 | COMMITTEE NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <input type="checkbox"/> GENERAL                               | COMMITTEE ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <input type="checkbox"/> SPECIFIC                              | COMMITTEE CAMPAIGN TREASURER NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
|                                                                | COMMITTEE CAMPAIGN TREASURER ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |
| <b>GO TO PAGE 2</b>                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                       |                                                                                                      |                                     |                                                              |                                  |                                                                                            |                                        |                                                  |                                                            |                                                          |                                                                                                      |                                            |                        |           |      |                                             |                                  |  |  |  |  |

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

|                                                    |                                                                                                                                       |                                               |
|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <b>15 C/OH NAME</b><br>ERWIN ANCELMO GARCIA-ROACHO |                                                                                                                                       | <b>16 Filer ID (Ethics Commission Filers)</b> |
| <b>17 CONTRIBUTION TOTALS</b>                      | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0                                          |
|                                                    | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                                  | \$ 0                                          |
| <b>EXPENDITURE TOTALS</b>                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.                                                                                            | \$ 0                                          |
|                                                    | 4. TOTAL POLITICAL EXPENDITURES                                                                                                       | \$ 0                                          |
| <b>CONTRIBUTION BALANCE</b>                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                                    | \$ 0                                          |
| <b>OUTSTANDING LOAN TOTALS</b>                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                         | \$ 0                                          |

**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 of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath                      Printed name of officer administering oath                      Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is Erwin Ancelmo Garcia-Roach, and my date of birth is November 1, 2021.

My address is 2521 Mesa Valley Dr., McKinney, TX, 75071, U.S.A.  
(street) (city) (state) (zip code) (country)

Executed in Collin County, State of Texas, on the 1 day of April, 20 21.  
(month) (year)

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

**SUBTOTALS - C/OH**

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

|                                                     |                                               |
|-----------------------------------------------------|-----------------------------------------------|
| <b>19 FILER NAME</b><br>Erwin Ancelmo Garcia-Roacho | <b>20 Filer ID (Ethics Commission Filers)</b> |
|-----------------------------------------------------|-----------------------------------------------|

| 21 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE                                                                       | SUBTOTAL<br>AMOUNT |
|-----------------------------------------------------------------------------------------------------------------|--------------------|
| 1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                       | \$ 0               |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                         | \$ 0               |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                   | \$ 0               |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS                                                                   | \$ 0               |
| 5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS               | \$ 0               |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                            | \$ 0               |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS              | \$ 0               |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                       | \$ 0               |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                         | \$ 0               |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$ 0               |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$ 0               |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0               |