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:

OFFICE USE ONLY

Date Received: 7/14/2025 TJ 4:04pm

Date Hand-delivered or Date Postmarked:

Receipt #: | Amount $:

Date Processed:

Date Imaged:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: Mr. FIRST: John MI: P. NICKNAME: LAST: Barnes SUFFIX:
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS (Change of Address)	ADDRESS / PO BOX: [redacted] APT / SUITE #: CITY: Houston, TX 77005 STATE: ZIP CODE:
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE: (713) PHONE NUMBER: 553-9357 EXTENSION:
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: Mrs. FIRST: Catherine MI: M. NICKNAME: LAST: Graber SUFFIX: J.D
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): [redacted] APT / SUITE #: CITY: Houston, TX 77005 STATE: ZIP CODE:
8 CAMPAIGN TREASURER PHONE	AREA CODE: PHONE NUMBER: [redacted] EXTENSION:

9 REPORT TYPE

- [ ] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (Officeholder Only)
- [x] July 15
- [ ] 8th day before election
- [ ] Exceeded Modified Reporting Limit
- [ ] Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month	Day	Year		Month	Day	Year
4	25	25	THROUGH	7	15	25

11 ELECTION

ELECTION DATE: Month 5 / Day 3 / Year 25

ELECTION TYPE:
- [ ] Primary
- [ ] Runoff
- [ ] Other Description
- [x] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): Council Member

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.

Additional Pages

COMMITTEE TYPE:
- [ ] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME:

COMMITTEE ADDRESS:

COMMITTEE CAMPAIGN TREASURER NAME:

COMMITTEE CAMPAIGN TREASURER ADDRESS:

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME	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)	$ 0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 100.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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

TRACYLYNN GARCIA
Notary Public, State of Texas
Comm. Expires 12-05-2025
Notary ID 12964485-7

NOTARY STAMP / SEAL

Sworn to and subscribed before me by John P. Barnes this the 14 day of July, 20 25, 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
	TRACYLYNN GARCIA	CITY SECRETARY

OR

(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)

AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

OFFICE USE ONLY	
Date Received 7/14/2025 TG 4:04pm.	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount $
Date Processed	
Date Imaged	

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than $32,810 in political contributions or made more than $32,810 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name	Filer ID #

1. I swear or affirm that I have not accepted more than $32,810 in political contributions or made more than $32,810 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds $32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the CAMPAIGN FINANCE report due on 7/15/25. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

TRACYLYNN GARCIA
Notary Public, State of Texas
Comm. Expires 12-05-2025
Notary ID 12964485-7

NOTARY STAMP / SEAL

Signature of Filer

Sworn to and subscribed before me by John P. Barnes this the 14 day of July, 20 25, 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
	TRACYLYNN GARCIA	CITY SECRETARY

OR

(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 _____ (month), 20_____ (year).

Signature of Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER