

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:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr Dale R NICKNAME LAST SUFFIX Pearson 				OFFICE USE ONLY	
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Fair Oaks Ranch, TX 78015				Date Received Jan 15, 2025 2:32 PM cp	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	AREA CODE PHONE NUMBER EXTENSION (830) 480-9955 				Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR FIRST MI MS Bobbe M NICKNAME LAST SUFFIX Barnes 				Receipt #	
	Amount \$				Date Processed	
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE Fair Oaks Ranch, TX 78015				Date Imaged	
	AREA CODE PHONE NUMBER EXTENSION (830) 755-6452 				Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	AREA CODE PHONE NUMBER EXTENSION (830) 755-6452 					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (830) 755-6452 					
9 REPORT TYPE	☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only) ☐ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month Day Year 1 / 6 / 25 THROUGH Month Day Year 1 / 15 / 25					
11 ELECTION	ELECTION DATE Month Day Year 5 / 3 / 25 ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other Description ☒ General ☐ Special					
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) City Council Place 4			
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					
GO TO PAGE 2						

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FORM C/OH
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15 C/OH NAME
Dale R. Pearson

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	\$ 0.00
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

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 Dale R. Pearson, and my date of birth is _____.

My address is _____, Fair Oaks Ranch, TX, 78015, Bexar.

Executed in Bexar County, State of TX, on the 15 day of January, 2025.

Signature of Candidate/Officeholder (Declarant)