

# 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:

**2**

<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>MS</b>	FIRST <b>Sarah</b>	MI <b>L</b>	<b>OFFICE USE ONLY</b>													
	NICKNAME	LAST <b>Sorensen</b>	SUFFIX														
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>215 Carolina St San Antonio TX 78210</b>			Date Received  <b>Recieved via email 5/9/24 at 9:42 p.m.</b>													
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>( 518 )</b>	PHONE NUMBER <b>469-6884</b>	EXTENSION			Date Hand-delivered or Date Postmarked											
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR <b>MS</b>	FIRST <b>Rachel</b>	MI <b>L</b>	Receipt #      Amount \$													
	NICKNAME	LAST <b>Sorensen</b>	SUFFIX	Date Processed													
<b>7</b> CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>439 Queen Anne Ct San Antonio TX 78209</b>			Date Imaged													
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE <b>( 210 )</b>	PHONE NUMBER <b>243-6622</b>	EXTENSION														
<b>9</b> 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) <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	Month      Day      Year <b>7 / 1 / 23</b>		THROUGH	Month      Day      Year <b>12 / 31 / 23</b>													
<b>11</b> ELECTION	ELECTION DATE Month      Day      Year  /      /		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special      _____														
<b>12</b> OFFICE	OFFICE HELD (if any) <b>Board Trustee</b>		<b>13</b> OFFICE SOUGHT (if known)														
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <small>Additional Pages</small>	<p><b>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.</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"><input type="checkbox"/> GENERAL</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>					<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS			COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
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<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS															
		COMMITTEE CAMPAIGN TREASURER NAME															
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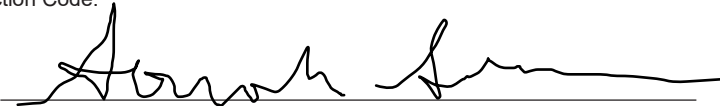
**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>15 C/OH NAME</b> Sarah L Sorensen		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	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	\$ 421.65
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

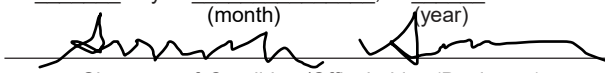
**OR**

**(2) Unsworn Declaration**

My name is Sarah Sorensen, and my date of birth is 03/02/1978.

My address is 215 Carolina St, San Antonio, TX, 78210, USA.  
(street) (city) (state) (zip code) (country)

Executed in Bexar County, State of Texas, on the 9 day of May, 2024.  
(month) (year)

  
 Signature of Candidate/Officeholder (Declarant)